PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) over the lines. is changed) STINSON LEONARD STREET POLITICAL ACTION COMMITEE PAC 1201 Walnut Street ADDRESS (number and street) Suite 2900 (Check if address is changed) Kansas City 64106 MO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PAC@STINSON.COM (Check if address is changed) Optional Second E-Mail Address chuck.hatfield@stinson.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 07 2016 C00459065 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Charles W. Hatfield Type or Print Name of Treasurer Charles W. Hatfield [Electronically Filed] 04 07 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

	Office			For further information contact:
	Use			Federal Election Commission
1	Only			Toll Free 800-424-9530
_	Offig			Local 202-694-1100

FFC F	orm 1 (Revised 02/2009)	Page 2
TYPE OF	COMMITTEE	i age 🗲
Candidat	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Cor information below.)	nplete the candidate
Name of Candidate		
Candidate Party Affilia	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		(Damasa, "
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is ϵ
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

Title or Position

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Write or Type Committee Name			_
STINSON LEON	IARD STREET POLITICAL AC	TION COMMITEE	PAC
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Rep	resentative, or Leadership PAC Sp	onsor
NONE			
Mailing Address			
Mailing Address			
	CITY	STATE ZIP CODE	
	CITT	STATE ZII GODE	
 Custodian of Records: Iden books and records. 	ify by name, address (phone number optional) and posit	ion of the person in possession of	committee
Douglas M Full Name	Doerfler		
Mailing Address	1201 Walnut Street		
Walling Address	Suite 2900		
	Kansas City	MO 64106	
Title or Position	CITY	STATE ZIP CODE	
	Telephone nur	mber	
 Treasurer: List the name and any designated agent (e.g., a 	address (phone number optional) of the treasurer of the ssistant treasurer).	e committee; and the name and add	dress of
Full Name Charles W. of Treasurer	Hatfield		
Mailing Address	230 West McCarty Street		
	Jefferson City	LMO L 165101	

CITY

ZIP CODE

STATE

Telephone number

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
Banks or Other Deposi	itories: List all banks or other depositories in which the committee deposit	sits funds, holds accounts, rents
Name of Bank, Deposito	maintains funds.	sits funds, holds accounts, rents
safety deposit boxes or i Name of Bank, Deposito	maintains funds. bry, etc. Bank 800 17th Street NW	
safety deposit boxes or in Name of Bank, Deposito	maintains funds. Dry, etc. 800 17th Street NW Washington DC	20006
safety deposit boxes or in Name of Bank, Deposito	maintains funds. Dry, etc. 800 17th Street NW Washington CITY STATE	
safety deposit boxes or in Name of Bank, Deposito	maintains funds. Dry, etc. 800 17th Street NW Washington CITY STATE	20006
safety deposit boxes or in Name of Bank, Deposito	maintains funds. Dry, etc. 800 17th Street NW Washington CITY STATE	20006
safety deposit boxes or in Name of Bank, Deposito	maintains funds. Dry, etc. 800 17th Street NW Washington CITY STATE	20006
safety deposit boxes or in Name of Bank, Deposito PNC Mailing Address Name of Bank, Deposito	maintains funds. Dry, etc. 800 17th Street NW Washington CITY STATE	20006
safety deposit boxes or in Name of Bank, Deposito Mailing Address Name of Bank, Deposito	maintains funds. Dry, etc. 800 17th Street NW Washington CITY STATE	20006

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

Amended Statement of Organization

Form/Schedule: Transaction ID: