

FEC
FORM 1

STATEMENT OF ORGANIZATION

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2009 MAR 31 A 8:51

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

DICK KELSEY FOR CONGRESS

ADDRESS (number and street)

(Check if address
is changed)

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address
is changed)

DANDD@CARROLLSWEB.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

DICKKELSEYFORCONGRESS.COM

2. DATE

03 / 20 / 2009

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT



NEW (N)

OR

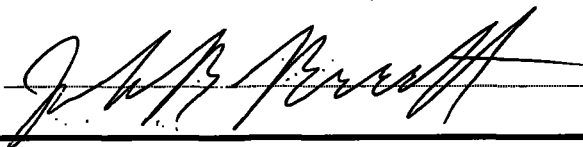


AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JOHN B. BARRETT

Signature of Treasurer



Date

03 / 20 / 2009

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
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

29030061166

5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate

R I C H A R D F K E L S E Y

Candidate
Party Affiliation

R E P

Office
Sought:☒

House

☐

Senate

☐

President

State

K S

District

0 4

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

☐ 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 segregated fund or party committee. (i.e., nonconnected committee)

☐ In addition, this committee is a Lobbyist/Registrant PAC.☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)**Joint Fundraising Representative:**

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

- | | | | |
|----|--------------------------|---------------|---|
| 1. | ☐ | FEC ID number | C |
| 2. | ☐ | FEC ID number | C |
| 3. | ☐ | FEC ID number | C |
| 4. | ☐ | FEC ID number | C |

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Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

S E C R E T A R Y

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

Mailing Address

Title or Position

T R E A S U R E R

Telephone number

29030061168

Full Name of
Designated
Agent

JOHN B BARRETT

Mailing Address

PO BOX 471

GODDARD

CITY

KS

STATE

67052

ZIP CODE

-0471

Title or Position

TREASURER / AGENT

Telephone number

316-794-8041

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

EQUITY BANK

Mailing Address

10222 W CENTRAL

WICHITA

CITY

KS

STATE

67212

ZIP CODE

-4613

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

29030061169

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
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☐ No Postmark	
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Next Business Day Delivery ☐	
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
 PREPARER (3/2005)	3/31/09 DATE PREPARED

(3/2005)

DATE PREPARED

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