FEC FORM 1	STATEMEN ORGANIZA	_	Office	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Wagle for Kans	as 			
	PO Box 781991			
ADDRESS (number and street				
 (Check if address is changed) 	Uichita CITY ▲		KS 67278 STATE ▲	[[ZIP CODE ▲
COMMITTEE'S E-MAIL ADD	BESS			
(Check if address is changed)				
	Optional Second E-Mail Add	ress		
(Check if address is changed)	_teamwagle.com			
2. DATE 07	23 / Y Y Y Y 2019			
3. FEC IDENTIFICATION	NUMBER ► C co	0713503		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
I certify that I have examine	d this Statement and to the best of	of my knowledge and belief it	is true, correct and co	mplete.
Type or Print Name of Treas	urer Koehler, Patricia, , ,			
Signature of Treasurer	Toehler, Patricia, , ,	[Electronically Filed]	Date 07 / T	23 / Y Y Y Y 2019
NOTE: Submission of false, en	roneous, or incomplete information n ANY CHANGE IN INFORMATIO			nalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	on FE	C FORM 1 Revised 06/2012)

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TYPE (DF COMMITTEE	
Candi	date 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. (Com information below.)	plete the candidate
Name o Candida		
Candida Party A		State KS District 00
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida		
Party	Committee:	
(d)		(Democratic, Republican, etc.) Party.
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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 se committee. (i.e., nonconnected committee)	gregated 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 F	undraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Committees Participating in Joint Fundraiser	
	1 FEC ID number	
	2. FEC ID number	
	3 FEC ID number	
	4 FEC ID number C	

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Write or Type Committee Name

Wagle for Kansas

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

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization	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.

Lisker, Lis	à, , ,
Full Name	
Mailing Address	228 S. Washington St.
	Ste. 115
	Alexandria VA 22314 Image: Image in the second sec
Title or Position	CITY STATE ZIP CODE
Assistant Treasurer	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	Koehler, Patricia, , ,
Mailing Address	PO Box 781991
	Wichita KS 67278 -
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

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Full Name of Designated Agent	Lisker, Lisa, , ,											I	I			I					
Mailing Address	228	S. Washington St.																			
	Ste.	115																			
	Ale	xandria										`		L ²	2314]-[
			CITY								STAT	E				ZI	РС	ODE	Ξ		
Title or Position	ırer 		_ _			٦	elep	hone	e ni	umb	ber	L	70)3] – [54 	.9]-[7	705	

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.

В	B&T	
Mailing Address	1909 K St., NW	
	Washington	DC 20006
	CITY	STATE ZIP CODE
Name of Bank, Depo	ository, etc.	
L		
Mailing Address		
	CITY	STATE ZIP CODE