Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. ED FOR PRESIDENT 2940 W 247TH ST ADDRESS (number and street) (Check if address is changed) LOUISBURG 66053 KS CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS EDTONSING@HOTMAIL.COM (Check if address is changed) Optional Second E-Mail Address EDTONSING@HOTMAIL.COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00584607 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. **EDWARD M TONSING** Type or Print Name of Treasurer EDWARD M TONSING [Electronically Filed] 80 2015 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: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF COMMITTEE	
Candidate Committee:  (a) X This committee is a principal campaign committee. (Complete the candid	ate information below)
	,
(b) This committee is an authorized committee, and is NOT a principal camp information below.)	baigh committee. (Complete the candidate
Name of Candidate EDWARD M TONSING	
Candidate Office Party Affiliation W Sought: House Sonete	State
Party Affiliation	X President District
(c) This committee supports/opposes only one candidate, and is NOT an au	thorized 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)	zation on line 6.) Its connected organization is a
Corporation Corporation w/o Capit	al 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 committee. (i.e., nonconnected committee)	is NOT a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor of	n line 6.)
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disbut committees/organizations, at least one of which is an authorized committee	•
(h) This committee collects contributions, pays fundraising expenses and disbur committees/organizations, none of which is an authorized committee of a fee	
Committees Participating in Joint Fundraiser	
1.               FEC	ID number C
2.             FEC	ID number C
3.             FEC	ID number C
	D number C

1		
FEC Form 1 (Revised		Page 3
Write or Type Committee Nam		
ED FOR PRES	SIDENT	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
NONE		
Mailing Address		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative L	eadership PAC Sponsor
<ol> <li>Custodian of Records: Idea</li> <li>books and records.</li> </ol>	entify by name, address (phone number optional) and position of the person in pro-	ossession of committee
1	) M TONSING	
Full Name	2940 W 247TH ST	
Mailing Address		
	LOUISBURG , KS , 66053	
	LOUISBURG KS 66053	
Title or Position	CITY STATE	ZIP CODE
1		-
8. <b>Treasurer:</b> List the name all any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the rassistant treasurer).	name and address of
	M TONSING	
of Treasurer	12040 W 247TH ST	
Mailing Address	2940 W 247TH ST	
	LOUISBURG KS 66053	
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
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FEC <b>Forn</b>	n 1 (Revised 02/2009)	Page <b>4</b>		
Full Name of Designated	EDWARD M TONSING	_ <del></del>		
Agent	<sub>1</sub> 2940 W 247TH ST			
Mailing Address	2540 W 24711101			
	LOUISBURG KS 6605	3		
	CITY STATE	ZIP CODE		
Title or Position				
	Telephone number			
safety deposit bo Name of Bank, [	Depository, etc.  LOUISBURG FIRST NATIONAL			
Mailing Address	1201 W Amity			
	LOUISBURG KS 6605	3		
	CITY STATE	ZIP CODE		
Name of Bank, Depository, etc.				
Mailing Address				
		1		