

08 NOV 13 AM 11:01

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Moran for Kansas

ADDRESS (number and street)

P.O. Box 1151

(Check if address is changed)

Hays

KS

67601

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

t_gottschalk@gottschalkcpas.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

785-527-2727

2. DATE

MM / DD / YYYY
11 / 07 / 2008

3. FEC IDENTIFICATION NUMBER

C C00312090

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

Timothy E Gottschalk

Signature of Treasurer

Timothy E. Gottschalk

Date

MM / DD / YYYY
11 / 07 / 2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

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 12/2007)

28020712548

5. TYPE OF COMMITTEE (Check One)

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 Jerry Moran

Candidate Party Affiliation REP Office Sought: House Senate President State KS District

- (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
- (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 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	<u>C</u> _____
2.	_____	FEC ID number	<u>C</u> _____
3.	_____	FEC ID number	<u>C</u> _____
4.	_____	FEC ID number	<u>C</u> _____
5.	_____	FEC ID number	<u>C</u> _____

28020712549

Write or Type Committee Name

Moran for Kansas

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

Empty grid lines for organization name.

Mailing Address

Empty grid lines for mailing address.

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

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

Timothy E Gottschalk

Mailing Address

1903 N Street

P O Box 541

Belleville

KS

66935

Title or Position ▼

Treasurer

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number **785** - **527** - **5631**

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

Timothy E. Gottschalk

Mailing Address

1903 N Street

P O Box 541

Belleville

KS

66935

Title or Position ▼

Treasurer

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number **785** - **527** - **5631**

28020712550

Full Name of Designated Agent

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

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.

Astra Bank

Mailing Address

PO Box 10

Belleville

KS

66935

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

28020712551

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.

[ADDITIONAL]

Farmers Bank & Trust

Mailing Address

PO Box 267

LaCrosse

KS

67548

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

Empty grid lines for organization name.

Mailing Address

Empty grid lines for mailing address.

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

- Connected Organization
- Affiliated Committee
- Leadership PAC Sponsor
- Joint Fundraising Representative

[ADDITIONAL]

Designated Agent

Full Name

Empty grid line for full name.

Mailing Address

Empty grid lines for mailing address.

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Empty line for telephone number.

Joint Fundraiser Participant

[ADDITIONAL]

Empty grid line for participant name.

FEC ID number

Grid box containing the letter 'C'.

28020712552

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.

[ADDITIONAL]

Commerce Bank

Mailing Address

PO Box 637

Wichita

KS

67201

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

- Connected Organization
- Affiliated Committee
- Leadership PAC Sponsor
- Joint Fundraising Representative

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

28020712553

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.

[ADDITIONAL]

Nekoma State Bank of Lacrosse

Mailing Address

PO Box 10

Lacrosse

KS

67548

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

- Connected Organization
- Affiliated Committee
- Leadership PAC Sponsor
- Joint Fundraising Representative

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

28020712554

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.

[ADDITIONAL]

The Bennington State Bank

Mailing Address

PO Box 1280

Salina

KS

67402

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

Empty grid lines for organization name.

Mailing Address

Empty grid lines for mailing address.

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

- Connected Organization
- Affiliated Committee
- Leadership PAC Sponsor
- Joint Fundraising Representative

[ADDITIONAL]

Designated Agent

Full Name

Empty grid line for full name.

Mailing Address

Empty grid lines for mailing address.

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Empty grid line for telephone number.

Joint Fundraiser Participant

[ADDITIONAL]

Empty grid line for participant name.

FEC ID number

Grid line for FEC ID number with a 'C' in a box.

28020712555

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.

[ADDITIONAL]

Bank of Commerce

Mailing Address

PO Box 538

Chanute

KS

66720

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

- Connected Organization
- Affiliated Committee
- Leadership PAC Sponsor
- Joint Fundraising Representative

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

28020712556



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Time Accepted	<input type="checkbox"/> AM <input type="checkbox"/> PM	Military	2nd Day	3rd Day
Flat Rate <input type="checkbox"/> or Weight	lbs. ozs.	Initial Alpha Country Code	Acceptance Emp. Initials	

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Delivery Date	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo: Day	Time	Employee Signature

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United States Senate

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Date of Receipt

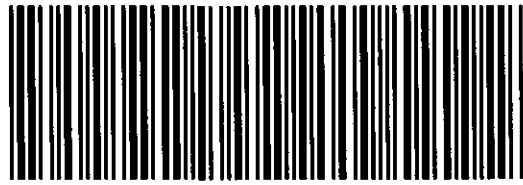
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28020712558



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