

GOTTSCHALK & COMPANY

CPA'S, L.L.C.
www.gottschalkcpas.com

Timothy E. Gottschalk, CPA
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FAX TRANSMITTAL

Number of Pages 9 and 1 cover sheet.

DATE: 11-7-08

SENT TO: Name: FEC

Address: _____

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Fax #: (202) 219 0174

ATTN: _____

RE: Moran For Kansas - FEC FORM 1-

FROM: GOTTSCHALK & COMPANY, CPA's, L.L.C.

Timothy E. Gottschalk, CPA
1903 N Street, P O Box 541
Belleville, Kansas 66935
Fax #: (785) 527-2727 Telephone #: (785) 527-5631

*Statement of
Organization
(filed with
Secretary of Senate)*

NOTES:

Per FEC Campaign Guide instructions attached please find the above referenced document mailed today to the VA "Office of Public Records".

*Thank you for your attention to this matter.
Sincerely,*

*Timothy E. Gottschalk
Campaign Treasurer*

Pursuant to Treasury Department Circular 230 regulations imposed on practitioners who render tax advice, we are required to advise you that any tax advice contained herein is not written or intended to be used for the purpose of avoiding tax penalties that may be imposed by the IRS or any governmental taxing authority or agency. Additionally, any tax advice contained in this communication (including attachments) cannot be used for promoting, marketing, or recommending to another party any transaction or matter addressed. This information is from an accounting firm and unless otherwise indicated, the information in this transmittal or communication is confidential and/or privileged and intended only for the recipient listed. If this has been sent to you in error or you are not the intended recipient or a person responsible for delivering this transmittal or communication to the intended recipient, you are hereby notified that any distribution, copying or dissemination of this transmittal or communication is strictly prohibited. If you have received this transmittal or communication in error, please contact the sender immediately for instructions concerning its return or destruction.

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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

11 / 07 / 2008

3. FEC IDENTIFICATION NUMBER

C 000312090

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

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. 5437g.

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 202-894-1100

FEC FORM 1 (Revised 12/2007)

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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> _____

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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 ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer 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 ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 785 - 527 - 5631

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FEC Form 1 (Revised 12/2007)

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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

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FEC Form 1 (Revised 12/2007)

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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

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

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FEC Form 1 (Revised 12/2007)

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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

[ADDITIONAL]

Joint Fundraiser Participant

FEC ID number

C

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FEC Form 1 (Revised 12/2007)

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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

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FEC Form 1 (Revised 12/2007)

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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

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

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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

28039914604

**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
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