



SECRETARY OF THE SENATE

09 APR 17 AM 10: 28

April 15, 2009

Secretary of the Senate
Office of Public Records
P.O. Box 2517
Alexandria, VA 22301-0109

Dear Secretary of the Senate,

Enclosed Please Find:

1. FEC Form 1, Statement of Organization – Amendment
2. FEC Form 3, Report of Receipts and Disbursements for the period ending March 31, 2009.

Thank you for your attention to these matters,

George Bruce
Treasurer
Kansans for Tiahart

Paid for by Kansans for Tiahart
www.ToddTiahart.com

29020170737

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATE
09 APR 17 AM 10:28

Office use only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5
Kansans for Tiahrt

ADDRESS (number and street) 2250 N Rock Road
(Check if address is changed) Suite 118A
Wichita KS 67226-2325
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)
(Check if address is changed) contact@toddtiahrt.com

COMMITTEE'S WEB PAGE ADDRESS (URL)
(Check if address is changed) wwwToddTiahrt.com

2. DATE 04 / 10 / 2009

3. FEC IDENTIFICATION NUMBER C C00459198

4. IS THIS STATEMENT NEW (N) OR X 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 George Bruce

Signature of Treasurer [Handwritten Signature] Date 04 / 10 / 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

29020170738

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 **Todd Tiaht**

Candidate Party Affiliation **REP** Office Sought: House Senate President State **KS** District **00**

- (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) 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.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

29020170739

Write or Type Committee Name

Kansans for Tiaht '

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

NONE

Mailing Address

		KS	00000

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

George Bruce

Mailing Address

131 S Pershing Street

Wichita

KS

67218 - 1425

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Treasurer

Telephone number **316 - 265 - 9311**

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

George Bruce

Mailing Address

131 S Pershing Street

Wichita

KS

67218 - 1425

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Treasurer

Telephone number **316 - 265 - 9311**

29020170740

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.

Legacy Bank

Mailing Address

8725 W Central Avenue

Wichita

KS

67212

3615

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Intrust Bank

Mailing Address

PO Box One

Wichita

KS

67201

5001

CITY ▲

STATE ▲

ZIP CODE ▲

29020170741

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]

Kanza Bank

Mailing Address

13605 W Maple

Ste 101

Wichita

KS

67235

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

29020170742

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]

Crosspoint Bank

Mailing Address

11225 College Boulevard, Suite 150

Overland Park

KS

66210

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

29020170743

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]

Home Bank & Trust

Mailing Address

217 N Main

Eureka

KS

67045

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

29020170744

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]

Halstead Bank

Mailing Address

314 Main Street

Halstead

KS

67056

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

29020170745

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.

[ADDITIONAL]

Name of Bank, Depository, etc.

Centra Bank

Mailing Address

1101 Frederick St.

Hagerstown

MD

21740

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

29020170746

usps.com

EXTREMELY URGENT

Please Rush To Addressee

119 TEBVT

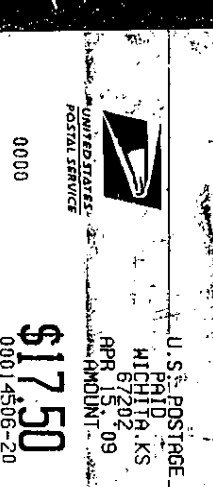
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119 TEBVT



UNITED STATES POSTAL SERVICE

Mailing Envelope



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Post Office To Addressee

Addressee Copy Label 1-B, March 2004

When used internationally affix customs declarations (PS Form 2976, or 2976A).

PRESS HARD. YOU ARE MAKING 3 COPIES.

ORIGIN (POSTAL SERVICE USE ONLY)

PO ZIP Code: 67202

Date Accepted: 4/5/09

Time Accepted: 10:30 AM

Flat Rate or Weight lbs. ozs.

Day of Delivery: Next 2nd 2nd Del. Day

Scheduled Date of Delivery: 4/11/09

Scheduled Time of Delivery: Noon 3 PM

Military 2nd Day 3rd Day

Intl Alpha Country Code

Pro. Recpt. Fee: \$ BY THE SENATE

Return Receipt Fee: \$ POST

COB Fee: \$

Total Postage & Fees: \$ 17.50

Acceptance Emp. Initials: [Signature]

DELIVERY (POSTAL SERVICE USE ONLY)

No. of Pieces: 1

Del. Day: AM

Del. Time: PM

Employee Signature: [Signature]

Employee Signature: [Signature]

Employee Signature: [Signature]

NO DELIVERY: Weekend Holiday Mailer Signature: [Signature]

WAVEN OF SIGNATURE (Domestic Mail Only)

Additional merchandise insurance is void if customer requests waiver of signature.

I wish delivery to be made without obtaining signature of addressee or signature of recipient. If delivery employee authorizes that delivery, employee's signature constitutes valid proof of delivery.

FROM: (PLEASE PRINT) PHONE: 1

Kansas Gov. Tibbitt
2250 N. Acker Rd #115A
Wichita, KS 67206

TO: (PLEASE PRINT) PHONE: 1

Secretary of the Senate
Room 2011
PC Box 2527
Oklahoma, OK 73107

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74707102062

NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7118
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL 04-15-09
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

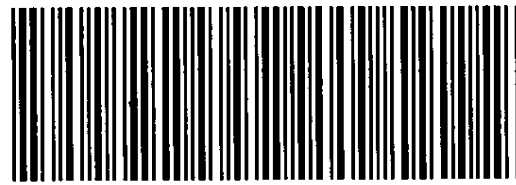
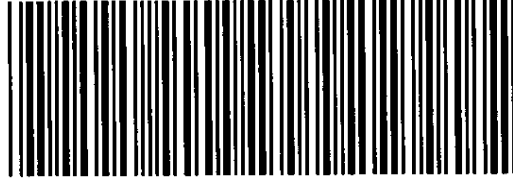
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 04.17.09

29020170748



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