

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

VICKY PAC

ADDRESS (number and street)

PO Box 531

(Check if address is changed)

Harrisonville

CITY ▲

MO

STATE ▲

64701

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

merilee@e-numerus.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

MM / DD / YYYY  
07 / 17 / 2014

3. FEC IDENTIFICATION NUMBER ►

C C00499798

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 Mr. Terry Kilroy

Signature of Treasurer

Mr. Terry Kilroy

[Electronically Filed]

Date

MM / DD / YYYY  
07 / 17 / 2014

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 Use Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

5. TYPE OF COMMITTEE

**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 \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State   
 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
  - 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. \_\_\_\_\_ FEC ID number
2. \_\_\_\_\_ FEC ID number
3. \_\_\_\_\_ FEC ID number
4. \_\_\_\_\_ FEC ID number

Write or Type Committee Name

VICKY PAC

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

VICKY HARTZLER

Mailing Address

30218 S. PLEASANT RIDGE ROAD

HARRISONVILLE

MO

64701

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 Merilee Martin

Mailing Address 2030 SW Sims Ave

Topeka

KS

66604

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number 785 - 633 - 0240

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 Mr. Terry Kilroy

Mailing Address 900 W 48th Place Ste 900

Kansas City

MO

64112

CITY

STATE

ZIP CODE

Title or Position Treasurer

Telephone number 816 - 374 - 0533

Full Name of Designated Agent

Mr. Terry Kilroy

Mailing Address

900 W 48th Place Ste 900

Kansas City

MO

64112

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

816

374

0533

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.

Boone County National Bank

Mailing Address

PO Box 4500

Jefferson City

MO

65102

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

UMB Bank

Mailing Address

5923 SW 29th St

Topeka

KS

66614

CITY

STATE

ZIP CODE