Approved: 4-28-06

Date

MINUTES OF THE SENATE FINANCIAL INSTITUTIONS AND INSURANCE COMMITTEE

The meeting was called to order by Chairman Ruth Teichman at 2:15 p.m., April 27, 2006, at the third floor rail.

All members were present.

Committee staff present:

Melissa Calderwood, Kansas Legislative Research Department Terri Weber, Kansas Legislative Research Department Bev Beam, Committee Secretary

Conferees appearing before the committee:

Others attending:

The Chair called a meeting at the rail to reconfirm the following appointees: John Cleland, Member, Pooled Money Investment Board, Appointment date April 20, 2006, Expiration date March 15, 2010; John Lehman, Member, Pooled Money Investment Board, Appointment date April 20, 2006, Expiration date March 15, 2010; Jane Schnellbacher, Member, State Banking Board, Appointment date April 20, 2006, Expiration date March 15, 2009; Joseph Smith, Member, State Banking Board, Appointment date April 20, 2006, Expiration Date March 15, 2009 and Mark Parman, Member, State Banking Board, Appointment date April 20, 2006, Expiration date March 15, 2009. (Attachment 1)

The Committee had previously studied the appointees' Information Summaries. The Chair asked for questions. Hearing none, <u>Senator Brungardt moved to confirm all five appointees</u>. <u>Senator Barnett seconded</u> the motion and it unanimously passed.

The meeting adjourned at 2:30 p.m.

Senate Confirmation Information Summary

Prepared and Submitted by the Office of Governor Kathleen Sebelius

Appointee: John Cleland

Position: Member, Pooled Money Investment Board

Appointment Date: April 20, 2006 Expiration Date: March 15, 2010

Term Length: 4 years

Statutory Authority: K.S.A. 75-4221a Party Affiliation: Republican

⇒ Statutory geographic representation Congressional District:

Requirements (insert any that apply)

County:

Size requirement (if any):

Other, specify:

⇒ Statutory party affiliation requirement: Not more than three members of the board shall be

of the same political party.

⇒ Statutory industry or occupation requirements: At least 10 years of direct work experience in the

areas of finance, accounting or management of investments or shall have at least a baccalaureate degree and at least five years of direct work

experience in the same areas.

Salary: Predecessor: himself – reappointed

Board Composition Prior to Confirmation of New Appointee:

See Attached List

Senate FI ?I Committee Attachment 1 April 27, 2006

Pooled Money Investment Board

Gov Appts:

Term Length: Four Years

Contact:

Derl Treff

Total Appts:

Notes:

Governor selects Chair. Gov appoints 4 with at least 10 years of direct work experience in the areas of finance,

accounting or management of investments or shall have at least a baccalaureate degree and at least five years of

direct work experience in the same areas. Other

member is the State Treasurer

Director of Investments

Topeka, KS 66612-1220

Phone: 785/296-3372

900 SW Jackson, Room 209

Statute:

KSA 75-4221a

Confirmation:

Affiliation

R

Gov Appt Counts Male/Female

CD

2

18s

1st--2nd--3rd--4th

Board Active

~

Party Ratio:

3:2

4:0

0:3:1:0

6/28/2002

R/D/U 1:3:0

Appointment Date Expiration Date Reapt

** Member fully assumed duties but awaits confirmation by the Full Senate

Cleland, Mr. John D.

5034 SW West Hills Drive

Topeka, KS 66606-2278

Work

Home (785) 272-3748

Fax

Position: a member

County

Shawnee

Succeeds: himself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Public member

Seat #: 002

[Details: Has served since 1999]

Leavenworth

D

41h

H

56h

11/9/2004

3/15/2008

3/15/2006

1

Dawson, Mr. Norman B.

1412 Jeanne Court Leavenworth, KS 66048

Home 913/772-6935

Cell

913-683-1558

nbdawson@sbcglobal.net

Position: a member

Succeeds: himself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Public member

Seat #: 005

		<u>Co</u>	ounty A	Affiliation	<u>CD</u>	<u>H</u>	<u>s</u>	Appointment Date	Expiration Date	Reapt
Jenkins, F	Honorable Lynn	Sha	wnee	R	2	52h	20s	3/30/2004		
5940 SV	W Clarion Lane									
Topeka,	, KS 66610	Position:	a member							
Work	785-296-3171	Succeeds:	Tim Shallenb	ourger						
Home	785-271-6585	Appointed By:	Statutory Me	mber						
		Nominations:								
		Statutory Remarks:	State Treasur	rer						
		Seat #:	005						*	
Lehman,	Mr. John W.	Cra	wford	D	2	2h	13s	6/28/2002	3/15/2006	~
423 E. 4	17 Highway									
Girard,	KS 66743-9492	Position:	a member							
Fax	(620) 724-6566	Succeeds:	himself rea	appointed						
Cell	(620) 724-3318	Appointed By:	Governor							
Work	(620) 724-6111	Nominations:								
Home	(620) 724-4373	Statutory Remarks:	Public memb	er						
jwlehma	an@ckt.net	Seat #:	004 [D	etails: Has	s serve	d since	1999]			
Worner, l	Mr. Eric "Rick" J.	Jol	nnson	D	3	25h	7s	10/12/2004	3/15/2008	~
3300 W	est 50th Terrace									
Shawne	e Mission, KS 66205	Position:	a member							
Work	816/932-7067	Succeeds:	William L. Y	/ager						
Home	913-432-9700	Appointed By:	Governor							
Fax	816-561-9537	Nominations:								
Cell	913-481-3420	Statutory Remarks:	Public memb	per						
rickkc(a	msn.com	Seat #:	003							

/	(for Appointments	Office use	e only)	
	KBI Check: _	_NA	In Process _	Complete

KANSAS GOVERNOR SEBELIUS APPOINTMENT QUESTIONNAIRE

KAUSAS GOVERNOR SEDEDICIONAL QUESTIONAL
Position for which you are applying: POOLED MONEY' INUZSTMENT BOAKE
Full Name (please include title and middle name): VOIN DAVI CZELINO
Home Address: Set WEST HILLS OF FOFELD WANSAS SHAWN = E
Business Address: (City, State, Zip) (County)
Business Name: SECURITY BENEFIT CACUL (County)
Position Title: 50 VICE TRES.
Home Phone: Cell Phone:
Facsimile No: E-Mail Address:
Driver's License No:Social Security No:
Date of Birth: 1 / 36 Place of Birth: 17 TH 1201 KS Kansas resident? YDS
Registered Voter? YES Party Affiliation: KEFUGLICALSY
Congressional District: Kansas Senate District: Kansas Representative District: 56
Do you have the legal right to live and work in the United States?
Education: 0.5. UN. J. p.F. KANSAS MBA " PENNSAS
MBA FINDSYLVENIA
Employment Experience: 35 YPS WITH 5BG - NOW FETTERS
Do you hold any professional licenses? If so, please provide numbers: NASD PRINCIPAL
What special skills could you bring to this position?
C 4.4(FN)
Previous government appointments: CHAIRMON FOOLED, MONEY BOLIAN (Please provide dates)

CONFLICTS OF INTEREST: (Yes answers require a detailed response. If necessary, use a separate sheet.)

- Relationship to governmental employees. Are you or your spouse or other close family members related to any state governmental official or employee? If yes, please provide details.

 No Y Yes_____
- Compensation. During the past five years have you or your spouse or other close family members received any compensation or been involved in any financial transaction with the State of Kansas? If yes, please explain. No Yes____
- Business relationships. Describe on a separate sheet any business relationship, dealing, or financial transaction which you have had during the last five years, whether for yourself, on behalf of a client, or acting as an agent, which you believe may constitute an appearance of impropriety or result in a potential conflict of interest in the position to which you want to be appointed. If none, please so state.
- 15. Transactions with officials. During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with any state government official? If, yes, please explain on a separate sheet. No Yes_____
- 16. **Spouse or other family members**. If the nature of employment for your spouse or other close family member is related in any way to the position to which you want to be appointed, please indicate the employer, the position, and the length of time it has been held. If it is not, please so state.
- 17. **Lobbying activities**. Describe briefly on a separate sheet any lobbying activity during the past ten years in which you have engaged for the purpose of influencing the passage, defeat, or modification of any legislative or administrative action. Describe briefly any lobbying activity during the last ten years in which your spouse has engaged for the purpose of influencing the passage, defeat, or modification or any legislative or administrative action that is related in any way to the position to which you are seeking appointment. (Lobbying activity includes any activity performed as an individual or agent of another individual, or of any organization that involves direct communication with an official in the executive branch of state government, or any official of the legislative branch.) If none, please so state.
- 18. **Regulated activities**. Describe on a separate sheet any interest that you, your spouse, or other close family member may have (whether as an officer, owner, director, trustee, or partner) in any corporation, firm, partnership, or other business enterprise and any non-profit organization or other institution that is regulated by or receives direct financial benefits from any department or agency of the State of Kansas. If none, please so state.
- Other. Please describe on a separate sheet any other matter in which you are involved that is or may be incompatible or in conflict with the discharge of the duties of the position to which you seek to be appointed or which may impair or tend to impair your independence of judgment or action in the performance of the duties of that position. If none, please so state.

30.	Firings. During the past ten years, have you be after being told that you would be fired, or did specific problems? If yes, please provide details	,					
31.	Alimony and child support. Are you now, or have you ever been delinquent in the payment of alimony or child support? If yes, please provide details. No <u>'X'</u> Yes						
32.	2. Consumption of alcohol. Are you currently abusing alcohol? No Yes						
33.	Controlled substances. Are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If yes, please describe. No Yes						
34.	4. Physical examination . If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test? No Yes						
35.	Other. Please provide any additional information should be considered in connection with your and additional information.						
FINAI sheet.)	ANCIAL MATTERS: (Yes answers require a et.)	detailed response. If necessary, use a separate					
36.	Delinquencies . Are you delinquent on any federal, state, or local debt? (Include delinquencies for income, property, or other taxes; governmental loans; overpayment of benefits; required payments into or under governmental programs; and other debts or required payments to the government; plus any defaults on or under loans which are or were guaranteed, insured, or subsidized by any unit of government.) If yes, please provide details on a separate sheet of paper. No Yes Yes						
REFE	FERENCES/SIGNIFICANT SUPPORTERS (e	ected officials, community leaders, friends, etc.)					
Name:	ne:Relations	ship to you:					
Teleph	ephone:						
Name:	ne: Relations	hip to you:					
Telepł	elephone:						
Name	ne: Relations	Relationship to you:					
Teleph	ephone:	*					
Name	ne: Relations	hip to you:					
Telepl	ephone:						



KANSAS GOVERNMENTAL ETETCS COMMISSION

STATEMENT OF SUBSTANTIAL INTERESTS FORM

INSTRUCTIONS. This statement (pages I through 4) must be completed by individuals who are required to do so by law. Any individual who intentionally fails to file as required by law, or intentionally files a false statement, is subject to prosecution for a class B misdemeanor.

Please read the "Guide" and "Definition" section provided with this form for additional assistance in completing sections "C" through "G". If you have questions or wish assistance, please contact the Commission office at 109 West 9th, Topeka, KS or call 785-296-4219.

West 9th, 1 opeka, & or vall 763-230-213.
A. IDENTIFICATION: PLEASE TYPE OR PRINT
CLELAND DEHN D
Last Name First Name MI
BETTY
Spouse's Name
(034) WEST HILLS DR
Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number
TAFEX 2 66606
City, State, Zip Code
185 272 3742 N/A
Home Phone Number (include area code) Business Phone Number (include area code)
B. THIS FORM IS REQUIRED TO BE FILED BECAUSE YOU ARE:
(check one or more of the following) 1 State Elected Official (Governor, Lt. Governor, Attorney General, Commissioner of Insurance,
State Treasurer, Secretary of State, State Senator, State Representative, Member of State
Board of Education or District Actorney);
2. Appointed Member of a State Board, Council, Commission or Authority,
3. Appointed State Position is Subject to Senate Confirmation; 4. Employee of a State Agency or University; 5. General Counsel for a State Agency; 6. Candidate for State Office.
5 General Counsel for a State Agency;
6. Candidate for State Office.
POOLED MONEX INVESTADENT GOARD
ist Name of A gency. Board, University or Elected Position (You may use aboreviations but not acconvins)
CHAIR MAN
Division if applicable (May use acronyms) Position
The last four digns of your social security number will aid in identifying you from others with the same
name on the computer list. This information is optional.

OWNERSHIP INTERESTS: List any comporation, partnership, proprietorship, trust, joint venture and every other ousiness interest, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned within the preceding 12 months a legal or equitable interest exceeding \$5,000 or 5%, whichever is less. If you or your spouse own more than 5% of a business, you must disclose the percentage held. Please insert additional page if necessary to complete this section

If you have nothing to report in Section "C", check here _____

		554		
BUSINESS NAME AND ADDRESS	TYPE OF BUSINESS	DESCRIPTION OF INTERESTS HELD	PHROMETOF OWNERSHIP INTERESTS	MEOW BA AEID
LSECURITY MUTUAL	IN VESTMENT COMPANIES	COMMEN 550CK	NA	ME
2 JANK of AMEDICA	BONKINE	21	<i>-1</i>	Spouse
3. CHEVRON TEXATO	FNERGY);	Dec	11
4 9 M CORP	MFG.		11	11
	SAN 2010	1.	* (10
5. DURLINGTON NORTHAN	X A Z			
7			*	
8.				
9.				
10.		<u> </u>		

GIFTS OR HONORARIA: List any person or business from whom you or your spouse either individually or collectively, have received grifs or honoraris having an aggregate value of \$500 or more in D. the preceding 12 months. If you have nothing to report in Section "D", check here

	ADDRESS	SECZIVAD B.A.
NAME OF PERSON OR BUSINESS FROM WEDM GI		

	s lower to the last calendar year, a	and any	
Ŧ.	RECEIPT OF COMPENSATION: List all places of employment in the last calendar year, a	ary, thing of	
	- aconomic benefit conferred on in 18th 101 SC 71000 100001-		
	reportable as taxable income on your federal income tax returns.	(4)	

	YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING
1.	YOUR PLACE(S) OF SAME AS SECTION "B", CHECK HERE
	CALENDAR YEAR II DAWL II Section "E"I, check here
	If you have nothing to report in booked 2 4, 4

ALCO MAN THE STREET, SALES		ADDRESS /	TYPE OF BUSINESS
NAME OF BUSINESS		PELA ES	1 1 MANCIAG
Camping BEN	F+11 !	181500	CFRVICED
De Cola Just			22

SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING 2. CALENDAR YEAR If you have nothing to report in Section "E"2, check here $\underline{\hspace{1cm} \hspace{1cm} \hspace{1c$

п уон пелс поште		
NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS

OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position of officer, director, associate, partner or proprietor at F. the time of filing, irrespective of the amount of compensation received for holding such position. Please insert additional page if necessary to complete this section. If you have nothing to report in Section "F", check here _____.

	POSITION HELD	HELD BY WHOW
BUSINESS NAME AND ADDRESS BUSINESS NAME AND ADDRESS	CHAIRMAN	ME
DECURITY	y.)	1/
2 SINTIE OF YAUSAS POOLED		
3.	AFS	POUSE
TOPEKA SIMPHON SOUTH		
5.		
6.		
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		1-9

RECEIPT OF FEES AND COMMUNISTONS: List each client or oustomer who pays fees of G. commissions to a pusiness or combination of pusinesses from which fees or commissions you or your spouse received an aggregate of \$2,000 or more in the preceding calendar year. The phrase "client or customer" relates only to ousinesses or combination of ousinesses. In the case of a partnership, it is the. partner's proportionate share of the ousiness, and hence of the fee, which is significant, without regard to -expenses of the parmership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report under this provision. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "G", check here

				1
	NAME OF CLIENT / CUSTOMER		ADDRESS	SECALAED 3 A
Carlot Communication Communication				
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12.				
13.				

H.	DHULARATION
	(LELAW) declare that this statement of substantial interests (including any
,	accompanying pages and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of all of my substantial interests and other matters required by law. I
	understand that the intentional failure to file this statement as required by law or intentionally immig a raise
	statement is a class B misdemeanor.

Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES

Return your completed statement to the Secretary of State, Memorial Hall, First Floor, 120 SW 10th Ave., Topeka, Kansas 56612-1594.

Senate Confirmation Information Summary

Prepared and Submitted by the Office of Governor Kathleen Sebelius

Appointee: John Lehman

Position: Member, Pooled Money Investment Board

Expiration Date: March 15, 2010 Appointment Date: April 20, 2006

Term Length: 4 years

Party Affiliation: Democrat Statutory Authority: K.S.A. 75-4221a

⇒ Statutory geographic representation Requirements (insert any that apply)

Congressional District:

County:

Size requirement (if any):

Other, specify:

⇒ Statutory party affiliation requirement:

Not more than three members of the board shall be

of the same political party.

⇒ Statutory industry or occupation requirements:

At least 10 years of direct work experience in the areas of finance, accounting or management of

investments or shall have at least a baccalaureate degree and at least five years of direct work

experience in the same areas.

Predecessor: himself – reappointed Salary:

Board Composition Prior to Confirmation of New Appointee:

See Attached List

Pooled Money Investment Board

Gov Appts:

Term Length: Four Years

Contact:

Derl Treff

Total Appts:

Notes:

Governor selects Chair. Gov appoints 4 with at least 10 years of direct work experience in the areas of finance, accounting or management of investments or shall have at least a baccalaureate degree and at least five years of

direct work experience in the same areas. Other

member is the State Treasurer

Topeka, KS 66612-1220 Phone: 785/296-3372

Director of Investments

900 SW Jackson, Room 209

KSA 75-4221a

Confirmation:

Gov Appt Counts Male/Female

1st--2nd--3rd--4th

R/D/U Board Active 🗸

Party Ratio:

Statute:

3:2

4:0

0:3:1:0

1:3:0

** Member fully assumed duties but awaits confirmation by the Full Senate

Shawnee

Affiliation R

H CD 2 56h

 \underline{S} 18s

Appointment Date Expiration Date Reapt 6/28/2002

3/15/2006

~

Cleland, Mr. John D.

5034 SW West Hills Drive

Topeka, KS 66606-2278

Work Home

(785) 272-3748

Fax

Position: a member

County

Succeeds: himself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Public member

Seat #: 002

[Details: Has served since 1999]

Leavenworth

D

41h 5s

11/9/2004

3/15/2008

V

Dawson, Mr. Norman B.

1412 Jeanne Court

Leavenworth, KS 66048

Home 913/772-6935

Cell 913-683-1558 nbdawson@sbcglobal.net Position: a member

Succeeds: himself -- reappointed

Appointed By: Governor

Nominations:

Statutory Remarks: Public member

Seat #: 005

		<u>Co</u>	unty	Affiliation	<u>CD</u>	<u>H</u>	<u>S</u>	Appointment Date	Expiration Date	Reapt
Jenkins, E	Ionorable Lynn	Sha	wnee	R	2	52h	20s	3/30/2004		
	V Clarion Lane									
Topeka,	KS 66610	Position:	a member							
Work	785-296-3171	Succeeds:	Tim Shalle	enburger						
Home	785-271-6585	Appointed By:	Statutory 1	Member						
		Nominations:								
		Statutory Remarks:	State Trea	surer						
		Seat #:	005							
Lehman,	Mr. John W.	Cra	wford	D	2	2h	13s	6/28/2002	3/15/2006	Y
423 E. 4	17 Highway									
Girard,	KS 66743-9492		a member							
Fax	(620) 724-6566			reappointed						
Cell	(620) 724-3318	Appointed By:	Governor							
Work	(620) 724-6111	Nominations:								
Home	(620) 724-4373	Statutory Remarks:								
jwlehma	an@ckt.net	Seat #:	004	[Details: Ha	is served	l since	1999]			
Worner,	Mr. Eric "Rick" J.	Jo	hnson	D	3	25h	7s	10/12/2004	3/15/2008	V
3300 W	est 50th Terrace									
Shawne	e Mission, KS 66205		a member							
Work	816/932-7067	Succeeds:	William I	. Yager						
Home	913-432-9700	Appointed By:	Governor							
Fax	816-561-9537	Nominations:								
Cell	913-481-3420	Statutory Remarks:	Public me	ember						
rickkc@	n)msn.com	Seat #:	003							

-	(for Appointments	Office use	only)	
	KBI Check: _	NA _	In Process _	Complete

KANSAS GOVERNOR SEBELIUS APPOINTMENT QUESTIONNAIRE

Position for which you are applying: Pooled Money Investment Board
Full Name (please include title and middle name): JOHN W. LELMAN
Home Address: 423 & 47 Huy Grace Ks 66743 Cember
Home Address: 423 £ 47 Huy GRARD Ks 66743 ChafeD (City, State, Zip) (County) Business Address: Po Box 6 GRARD Ks 66743 ChafeD (City, State, Zip) (County) Business Name: First National Bank
Business Name: FIRST NATIONAL BARK (County)
Position Title: PRESIDENT / CEO
Home Phone: 620 724 4373 Business Phone: 620 724 6111 Cell Phone: 620 724 3318
Facsimile No: 620 724 6566 E-Mail Address: JW/ehmane CKt. NEt
Driver's License NoSocial Security No:
Date of Birth: 428/54 Place of Birth: P. 45 6 Kansas resident? VES
Registered Voter? YES Party Affiliation: DEMOCRAT
Congressional District: 2 A Kansas Senate District: 13 Kansas Representative District: 2 A
Do you have the legal right to live and work in the United States?
Education: USA 248, Grand, High School, A.A. Ft Scott, CC
B.S. Agricultural Economics, Kansus STATE University
Employment Experience: Kansus Young FARINCE Education, 1975-1978
1ST Now BK A Greard 1978- Present, Cattleman 1970-Prient
Do you hold any professional licenses? If so, please provide numbers:
What special skills could you bring to this position? Nearly 30 years barring
Experience
Previous government appointments: 2 PRevious Appl.'s to PMIB (Please provide dates)

CONFLICTS OF INTEREST: (Yes answers require a detailed response. If necessary, use a separate sheet.)

12.	Relationship to governmental employees. Are you or your spouse or other close family
	members related to any state governmental official or employee? If yes, please provide details.
	No_X_Yes

- Compensation. During the past five years have you or your spouse or other close family members received any compensation or been involved in any financial transaction with the State of Kansas? If yes, please explain. No_X_Yes____
- Business relationships. Describe on a separate sheet any business relationship, dealing, or financial transaction which you have had during the last five years, whether for yourself, on behalf of a client, or acting as an agent, which you believe may constitute an appearance of impropriety or result in a potential conflict of interest in the position to which you want to be appointed. If none, please so state.
- 15. **Transactions with officials**. During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with any state government official? If, yes, please explain on a separate sheet. No X Yes____
- Spouse or other family members. If the nature of employment for your spouse or other close family member is related in any way to the position to which you want to be appointed, please indicate the employer, the position, and the length of time it has been held. If it is not, please so state.
- 17. **Lobbying activities**. Describe briefly on a separate sheet any lobbying activity during the past ten years in which you have engaged for the purpose of influencing the passage, defeat, or modification of any legislative or administrative action. Describe briefly any lobbying activity during the last ten years in which your spouse has engaged for the purpose of influencing the passage, defeat, or modification or any legislative or administrative action that is related in any way to the position to which you are seeking appointment. (Lobbying activity includes any activity performed as an individual or agent of another individual, or of any organization that involves direct communication with an official in the executive branch of state government, or any official of the legislative branch.) If none, please so state.
- Regulated activities. Describe on a separate sheet any interest that you, your spouse, or other close family member may have (whether as an officer, owner, director, trustee, or partner) in any corporation, firm, partnership, or other business enterprise and any non-profit organization or other institution that is regulated by or receives direct financial benefits from any department or agency of the State of Kansas. If none, please so state.
- Other. Please describe on a separate sheet any other matter in which you are involved that is or may be incompatible or in conflict with the discharge of the duties of the position to which you seek to be appointed or which may impair or tend to impair your independence of judgment or action in the performance of the duties of that position. If none, please so state.

30.	Firings. During the past ten years, have you been fired from a job for any reason? Did you quit after being told that you would be fired, or did you leave by mutual agreement because of specific problems? If yes, please provide details. No X Yes
31.	Alimony and child support. Are you now, or have you ever been delinquent in the payment of alimony or child support? If yes, please provide details. No_X_Yes
32.	Consumption of alcohol. Are you currently abusing alcohol? No_X_Yes
33.	Controlled substances. Are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If yes, please describe. No X Yes
34.	Physical examination. If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test? NoYes_X_
35.	Other. Please provide any additional information, favorable or unfavorable, which you feel should be considered in connection with your appointment.
FINAI sheet.)	NCIAL MATTERS: (Yes answers require a detailed response. If necessary, use a separate
36.	Delinquencies . Are you delinquent on any federal, state, or local debt? (Include delinquencies for income, property, or other taxes; governmental loans; overpayment of benefits; required payments into or under governmental programs; and other debts or required payments to the government; plus any defaults on or under loans which are or were guaranteed, insured, or subsidized by any unit of government.) If yes, please provide details on a separate sheet of paper. No Yes
REFE	RENCES/SIGNIFICANT SUPPORTERS (elected officials, community leaders, friends, etc.)
Name:	I'm BARONE Relationship to you: FRIEND
Teleph	ione: 785-296-7370
Name:	Bos GRANT Relationship to you: FRITE
(none: 785-296-7650
Name:	Chuck Stones - KBA Relationship to you: FR. End / Bus. ness
500	none: 785-232-3444
Name:	JOHN KOVACIE Relationship to you: FR. S.
Telenh	none: 620 - 724 - 6542

JOHN W. LEHMAN COVER SHEET

- 2. Government Experience. I have served on numerous advisory boards and committees for the City of Girard, Extension Service and Crawford County. I currently serve on the Judicial Nominating Committee for Crawford County. I Chair the Economic Development Committee for the City of Girard. As previously stated, I have served on the Pooled Money Investment Board for approximately six (6) years.
- 4. Honors and Awards. I have received recognition for service to my church, community, school, profession and public.

5, Organization Affiliations. I have a passion for charities and causes of the American Indian and have supported countless charities, reservations and causes in that regard. I have served in various positions at Trinity Lutheran Church including Chairman and Board of Elders. I have previously and currently serve as our regional member of the Kansas Bankers Association Governing Council and Board of Directors. I have also served on several task forces and committees for the Kansas Bankers Association including strategic planning and public funds.

I have also served the American Bankers Association as a member of the Community Bankers Council representing Kansas. I currently serve as the Kansas appointee on the ABA Membership Council. I have also served on several task forces and committees including a tax issue task force and also have been on the program at the ABA National Community Bankers Conference.

I served as treasurer of the Crawford County Fair Association for many years. I have been treasurer and a board member of the USD #248 Educational Foundation for fifteen (15) years.

STATE OF KANSAS



KANSAS GOVERNMENTAL ETHICS COMMUSSION

STATEMENT OF SUBSTANTIAL INTERESTS FORM

INSTRUCTIONS. This statement (pages 1 through 4) must be completed by individuals who are required to do so by law. Any individual who intentionally fails to file as required by law, or intentionally files a false statement, is subject to prosecution for a class B misdemeanor.

Please read the "Guide" and "Definition" section provided with this form for additional assistance in completing sections "C" through "G". If you have questions or wish assistance, please contact the Commission office at 109 West 9th. Topeka KS or call 785-296-4219.

West 9th, Topeka, KS or call 785-296-4	<u>121</u> 9.	*
A IDENTIFICATION:	PLEASE TYPE OR P	RINT
LEHMAN	JOHN	W
Last Name	First Name	M
LEHMAN	BEHY	7
Spouse's Name	. /	
H23 E 47 Number & Street Name, Apartment	Hwy.	
	Number, Rural Route, or P	O. Box Number
GiRARD X	5 6674	<i>4</i> 3
City, State, Zip Code		
620 724 4373		Business Phone Number (include area code)
Home Phone Number (include area	code)	Business Phone Number (include area code)
T 1 State Flected Official	more of the following) (Governor, Lt. Governor, A ary of State, State Senator, District Attorney); a State Board, Council, Co on is Subject to Senate Cor gency or University, State Agency;	Attorney General, Commissioner of Insurance, State Representative, Member of State mmission or Authority,
List Name of Agency, Board, University	- The stad Desirion (Van H	new use appreviations but not acconyms)
POOLED MONEY INVESTIG	-	BOARD MENDER
Division if applicable (May use a	.cronyms)	Position
The last four digits of your social name on the computer list. This is	security number will aid in	identifying you from others with the same
(•	Rev. 2/2001

OWNERSTIP INTERESTS: List any corporation, partnership, proprietorship, trust, joint venture and every other business interest, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned within the preceding 12 months a legal or equitable interest exceeding \$5,000 or 5%, whichever is less. If you or your spouse own more than 5% of a business, you must disclose the percentage held. Please insert additional page if necessary to complete this

If you have nothing to report in Section "C", check here _____

				1
BUSINESS NAME AND ADDRESS	TYPE OF BUSINESS	DESCRIPTION OF INTERESTS HELD	PERCENT OF OWNERSED INTERESTS	MEOW BA HETD
Mid America Bancshares POBOX 6 GRAPORKS 66743	BANK Holding	J. TOEK	5.5%	JWL
2 ETCO Specialty Products 2 Transk Ks 6675	Commercial Special products Mat	Stock	10%	Jul
1 KANSAS BUSINES FORMS GERSED KS 667473	Business Forms	8-	750%	
423 & 47 Any Giztech little	Fren / Cattle	Sole owner	100%	Zur
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ć.				
7.				
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D. <u>GTFTS OR HONORARIA</u>: List any person or business from whom you or your spouse either individually or collectively, have received gifts or honoraria having an aggregate value of \$500 or more in the preceding 12 months.

If you have nothing to report in Section "D", check here

	ADDRESS	RECEIVED BY
WAIME OF PERSON OR BUSINESS IROM WHOM GIFT RECEIVED		į.
· · · · · · · · · · · · · · · · · · ·		
		1-20

- E. <u>RECEIPT OF COMPENSATION</u>: List all places of employment in the last calendar year, and any other businesses from which you or your spouse received \$2,000 or more in compensation (salary, thing of value, or economic benefit conferred on in return for services rendered, or to be rendered); which was reportable as taxable income on your federal income tax returns.
 - 1. YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR. IF SAME AS SECTION "B", CHECK HERE ____.

 If you have nothing to report in Section "E"1, check here ____.

<u></u>		
NAME OF BUSINESS 1. ST NAT'L BINK PO BUSINESS 2. SEIF 423 E	ADDRESS (6 G-RAR & KS BAM 47 Huy GRAR & FARAK /	E BUSINESS K Call E

2. SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR

If you have nothing to report in Section "E"2, check here

			ADDRESS	TYPE OF BUSINESS
NAM NAM	Æ OF BUSINESS	Comments of the same of the sa		
	0*0			

F. OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position of officer, director, associate, partner or proprietor at the time of filing, irrespective of the amount of compensation received for holding such position. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "F", check here _____.

SA THE DATE OF	POSITION HELD	HEID BY WHOM
1. Mid America Bones Lares	PRESIDENT & BOARD MEmber	JWL
PD Box 6 GRARD KS 66743 2 15- Nat & Bonk PO Box 6 GRARD KS 66743	PRSSIDERT + Board Nember	Jul
5. STE Specialty PRoducts Biracl Ks	Board Henber	ZWZ.
Kangas Bus. ness Forms Contrad to	BosedAlenbea	JWZ
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= USD 248 Edgestone touck too	Bosed Alamae Sec. /TR.	twi
GRAND KS -HD # 1 Foundation	Boxed Man beg	BJL
GiRADE, KS	-	1_21

RECEIPT OF FEES AND COMMISSIONS: List each client or customer who pays fees of G. commissions to a business or combination of businesses from which fees or commissions you or your spouse received an aggregate of \$2,000 or more in the preceding calendar year. The phrase "client or customer" relates only to ousinesses or combination of ousinesses. In the case of a partnership, it is the partner's proportionate share of the business, and hence of the fee, which is significant, without regard to expenses of the partnership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report under this provision. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "G", check here

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	NAME OF CLIENT / CUSTOMER		ADDRESS	RECEIVED BY
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F.	DECLARATION:
100	DIVILLE LA

I John W. Celinau declare that this statement of substantial interests (including any accompanying pages and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of all of my substantial interests and other matters required by law. I understand that the intentional failure to file this statement as required by law or intentionally filing a false statement is a class B misdemeanor.

NUMBER OF ADDITIONAL PAGES

Return your completed statement to the Secretary of State, Memorial Hall, First Floor, 120 SW 10th Ave., Topeka, Kansas 56612-1594.

Senate Confirmation Information Summary

Prepared and Submitted by the Office of Governor Kathleen Sebelius

Appointee: Jane Schnellbacher

Position: Member, State Banking Board

Appointment Date: April 20, 2006 Expiration Date: March 15, 2009

Term Length: 3 years

Statutory Authority: K.S.A. 74-3004 Party Affiliation: Democrat

⇒ Statutory geographic representation Congressional District: Of the six banker members, the

Governor shall appoint one from each Kansas congressional district and the remainder from the state at

large.

Requirements (insert any that apply)

County:

Size requirement (if any):

Other, specify:

⇒ Statutory party affiliation requirement: Not more than five members of the board shall be

members of the same political party.

⇒ Statutory industry or occupation requirements: Bankers with at least 5 years experiences in a state

bank in Kansas and public members with no

connection to banking.

Salary: Predecessor: herself -- reappointed

Board Composition Prior to Confirmation of New Appointee:

See Attached List

State Banking Board

Term Length: Three Years Contact: Judi M. Stork, Deputy Commissioner Gov Appts: 9 Office of the Bank Commissioner 9 Limit of 2 terms; 6 bankers at least 5 years experience Total Appts: Notes: 700 SW Jackson, Suite 300 in a state bank in Kansas: 1 banker from each CD; the rest at-large members. Topeka, KS 66603-3796 3 public members -- no connection to banking. No 785/296-2266 nonbanker member shall concurrently serve as an officer or director in any state or national bank or trust company wherever located. KSA 74-3004 Statute: Gov Appt Counts Male/Female 1st--2nd--3rd--4th R/D/U Board Active Confirmation: Party Ratio: 5:4 8:1 2:2:3:2 2:5:2 ** Member fully assumed duties but awaits confirmation by the Full Senate County Affiliation CD $\overline{\mathbf{H}}$ $\underline{\mathbf{S}}$ Appointment Date Expiration Date Reapt D 4 84h 29s 6/30/2004 3/15/2007 ~ Sedgwick Bias, Mr. Andrew L. 3921 Pine Knot Ct. Wichita, KS 67208 Position: a member Succeeds: Jane A. Bateman Work 316-942-4848 316-688-5378 Appointed By: Governor Home 316-942-0190 Nominations: Fax Cell 316-518-5242 Statutory Remarks: Public Member; cannot serve as officer or director of any bank abias@mennonitehousing.com Seat #: 005 Ellis 110h 37s 10/18/2005 3/15/2008 ~ Downing, Mr. Michael R. 1503 Lakeview St. Ellis, KS 67637 Position: a member Succeeds: Michael D. Stevens Work 785-726-3113 Appointed By: Governor Home 785-726-4531 785-726-3795 Fax Nominations: Cell 785-623-3645 Statutory Remarks: First District Banker Member mdowning@ellisstatebank.com

Seat #: 009

		<u>Cc</u>	ounty _	Affiliation	<u>CD</u>	<u>H</u>	<u>s</u>	Appointment Date		Reapt
Minor, M	Ir. Melvin	Sta	ıfford	D	1	114h	33s	10/18/2005	3/15/2008	\checkmark
1338 N	E 10th St.									
Stafford	l, KS 67578	Position:	a member							
Cell	(620) 546-3328	Succeeds:	Dan R. Pete	rson						
Home	(620) 234-5887	Appointed By:	Governor							
cdmino	r@southwind.net	Nominations:								
		Statutory Remarks:	Public Mem	nber; cannot	serve a	as offic	er or d	irector of any bank		
		Seat #:	800							
O'Sulliva	n, Mr. James G.	Jol	nson	U	3	28h	11s	6/30/2004	3/15/2007	✓
12608 (Cambridge Rd									
Shawne	e Mission, KS 66209	Position:	a member							
Work	913-319-0351	Succeeds:	Steve A. Mo	cSpadden						
Home	913-469-1075	Appointed By:	Governor							
Fax	913-319-0322	Nominations:								
josulliv	an@midwesttrust.com	Statutory Remarks:	At-Large Ba	anker Meml	per					
		Seat #:	003							
Parman, l	Mr. Mark C.	Jol	nnson	D	3	20h	11s	7/1/2003	3/15/2006	✓
10220 (Catalina									
Overlan	nd Park, KS 66207	Position:	a member							
Work	(913) 239-1564		Bruce B. M	organ						
Home	913-381-1891	Appointed By:	Governor							
Fax	(913) 851-2014	Nominations:								
Cell	(913) 645-9047	Statutory Remarks:	Third Distri	ct Banker N	Member 1					
mparma	an@solutionsbank.com	Seat #:	007							
Rucker, I	Mr. Richard D.	Gree	enwood	R	4	76h	16s	6/30/2004	3/15/2007	
1644 P	Road ☐ P.O. Box 367									
Eureka,	, KS 67045	Position:	a member							
Work	620/583-5516	Succeeds:	himself re	eappointed						
Home	620/583-5316	Appointed By:	Governor							
Fax	620/583-5411	Nominations:								
Dick@l	Fox-net.net	Statutory Remarks:	Fourth Dist	rict Banker	Membe	er				
		Seat #:	004							

		<u>Co</u>	unty Affil	iation (<u>CD</u>	H	<u>S</u>	Appointment Date	Expiration Date	
Schnellba	cher, Mrs. Jane A.	Sha	wnee])	2 5	5h	20s	10/27/2003	3/15/2006	V
2010 S.V	W. Bowman Court									
Topeka,	KS 66604	Position:	a member							
Home	785-273-1909	Succeeds:	H. Allan Caldwo	ell						
otto66@	webtv.net	Appointed By:	Governor							
		Nominations:								
		Statutory Remarks:	Public Member;	cannot se	rve as	office	r or d	irector of any bank		
		Seat #:	006							
Smith, Mi	r. Joseph A.	Ne	osho	D	2	8h	14s	9/17/2003	3/15/2006	✓
19600 L	Jdall Road									
Erie, KS	S 66733	Position:	a member							
Fax	(620) 449-2828	Succeeds:	Gary J. Cinotto							
Cell	(629) 820-1369	Appointed By:	Governor							
Work	(620) 354-6435	Nominations:								
Home	(620) 754-3870	Statutory Remarks:	Second District	Banker M	ember					
		Seat #:	002							
Winter, J	r., Mr. Winton A.	Do	ouglas	R	3 4	14h	2s	10/18/2005	3/15/2008	\checkmark
737 Ind	iana									
Lawrence	ce, KS 66044	Position:	a member							
Work	785-842-4004	Succeeds:	Nancy A. Taylo	r						
Home	785-843-4479	Appointed By:	Governor							
Fax	785-842-5842	Nominations:								
Cell	785-218-9915	Statutory Remarks:	At-Large Banke	er Membei	i					
wwinter	@epeoples.com	Seat #:	001							

Resume

I was born on October 2, 1930 in Cincinnati, Ohio and lived there until September 1968 when our family moved to Kansas. All my schooling took place in Ohio. I attended Mt. Notre Dame Academy from Grade 2 – 12 and Our Lady of Cincinnati College for one year immediately after high school.

I was married November 1951 and had four children from that marriage. Other than working for a short time at a local bank until my first child was born, I was a stay at home Mom.

A year after my husband's transfer to Topeka, I took a part-time teller job at Capital City Bank and worked there 22 years, progressing to Vice President, Director of Marketing. During this time, I was the community face for the bank, serving on the Board of Topeka Chamber of Commerce. The Mayor of Topeka appointed me to the Board of the Metropolitan Topeka Airport Authority for three years, then reappointed me. I was also a member of American Business Women Area Chapter, serving as President one year and being named Woman Of The Year for the group. I also was an active member of the Sales and Marketing Executives, receiving the Distinguished Sales Award in 1989.

When I retired from the bank in 1990 to get married, I was managing the downtown branch of Capital City Bank.

I have been active in my church and was one of the original Eucharistic Ministers.

Since my retirement, I have stayed active in my church, Most Pure Heart of Mary during the fall, winter and spring, working one day a month with members of our church at Let's Help. I am also involved with Concerned Citizens of Topeka, serving as Vice-President. I have also been very involved with the Topeka Jayhawk Club, supporting the Williams Fund of Kansas University.

(for Appointments	Office use	e only)	
KBI Check: _	NA _	In Process	Complete

KANSAS GOVERNOR SEBELIUS APPOINTMENT QUESTIONNAIRE

<i>₽</i>
Position for which you are applying: MANSAS BANKING BOARD
Full Name (please include title and middle name): MRS JANE ANN S. SCHNELLBACHE
Home Address: 2010 SW BOWMAN CT. TOPEKA / SEGGY SHAWNEE (City, State, Zip) (County)
Business Address: (City, State, Zip) (County) (City, State, Zip) (County)
Business Name:
Position Title:
Home Phone: 785-273 1969 Business Phone: Cell Phone:
Facsimile No: E-Mail Address: OTTO 660 WEBTV, NET
Driver's License NoSocial Security No:
Date of Birth: 10-2-30 Place of Birth: LINGINNATI OHIO Kansas resident? XES
Registered Voter? YES Party Affiliation: DEMDERAT
Congressional District: 2 Kansas Senate District: 20 Kansas Representative District: 55
Do you have the legal right to live and work in the United States? Yts
Education: 8 YRS. GRADE SCHOOL, 4 YRS. HIGH SCHOOL, 1 YR. COLLEGE
Employment Experience: 22 YEARS & CAPITAL CITY BANK, TOPEKA
STARTING AS PITTELER - TO V.P. MARKETING, MGR. OF DOWNTOWN BAN
Do you hold any professional licenses? If so, please provide numbers:
What special skills could you bring to this position? OPEN-MINDED, HINEST, RELIABLE
WORK WELLWITH OTHERS
Previous government appointments: METROJOLLITAN TOBEKA AIR DERT AUTHIRIT (Please provide dates) Andre 1985 Andre 1990

CONFLICTS OF INTEREST: (Yes answers require a detailed response. If necessary, use a separate sheet.)

- 13. Compensation. During the past five years have you or your spouse or other close family members received any compensation or been involved in any financial transaction with the State of Kansas? If yes, please explain. No____Yes_
- Business relationships. Describe on a separate sheet any business relationship, dealing, or financial transaction which you have had during the last five years, whether for yourself, on behalf of a client, or acting as an agent, which you believe may constitute an appearance of impropriety or result in a potential conflict of interest in the position to which you want to be appointed. If none, please so state.
- 15. **Transactions with officials**. During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with any state government official? If, yes, please explain on a separate sheet. No Yes_____
- Spouse or other family members. If the nature of employment for your spouse or other close family member is related in any way to the position to which you want to be appointed, please indicate the employer, the position, and the length of time it has been held. If it is not, please so state.
- 17. **Lobbying activities**. Describe briefly on a separate sheet any lobbying activity during the past ten years in which you have engaged for the purpose of influencing the passage, defeat, or modification of any legislative or administrative action. Describe briefly any lobbying activity during the last ten years in which your spouse has engaged for the purpose of influencing the passage, defeat, or modification or any legislative or administrative action that is related in any way to the position to which you are seeking appointment. (Lobbying activity includes any activity performed as an individual or agent of another individual, or of any organization that involves direct communication with an official in the executive branch of state government, or any official of the legislative branch.) If none, please so state.
- Regulated activities. Describe on a separate sheet any interest that you, your spouse, or other close family member may have (whether as an officer, owner, director, trustee, or partner) in any corporation, firm, partnership, or other business enterprise and any non-profit organization or other institution that is regulated by or receives direct financial benefits from any department or agency of the State of Kansas. If none, please so state.
- Other. Please describe on a separate sheet any other matter in which you are involved that is or may be incompatible or in conflict with the discharge of the duties of the position to which you seek to be appointed or which may impair or tend to impair your independence of judgment or action in the performance of the duties of that position. If none, please so state.

30.	Firings. During the past ten years, have you been fired from a job for any reason? Did you quit after being told that you would be fired, or did you leave by mutual agreement because of specific problems? If yes, please provide details. NoYes
31.	Alimony and child support. Are you now, or have you ever been delinquent in the payment of alimony or child support? If yes, please provide details. No Yes
32.	Consumption of alcohol. Are you currently abusing alcohol? NoYes
33.	Controlled substances. Are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If yes, please describe. No Yes
34.	Physical examination. If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test? No Yes
35.	Other. Please provide any additional information, favorable or unfavorable, which you feel should be considered in connection with your appointment.
FINAI sheet.)	NCIAL MATTERS: (Yes answers require a detailed response. If necessary, use a separate
36.	Delinquencies. Are you delinquent on any federal, state, or local debt? (Include delinquencies for income, property, or other taxes; governmental loans; overpayment of benefits; required payments into or under governmental programs; and other debts or required payments to the government; plus any defaults on or under loans which are or were guaranteed, insured, or subsidized by any unit of government.) If yes, please provide details on a separate sheet of paper. No Yes
REFE	RENCES/SIGNIFICANT SUPPORTERS (elected officials, community leaders, friends, etc.)
Name:	LARRY TENOPIR Relationship to you: NONE /FRIEND -OUR ATTURNE
	none: 233-9467 (0)
Name:	MARTHA PILAND Relationship to you: FRIEND/NONE
Teleph	none: 232-4156 (6)
Name	JAN (RAIG Relationship to you: FRIEND/NONE
	none: 291-2490 (6)
Name	BILL Roy M.D. Relationship to you: NONE / FRIEND
	none: 273-6304 (H)

I was appointed to the Metropolitan Topeka Airport Authority Board by the Mayor of Topeka in March 1985 and served until 1998; was reappointed in 1988 and resigned in March 1990 because of time conflict with my job.

Sought seat on Topeka City Council District 6; was defeated.

Work at Let's Help with my Church; help to cook meals and serve needy. Can't remember when my husband and I started (it was after our marriage in 1991 until present).

Concerned Citizens For Topeka - A civic group concerned with working against hate and injustice. 1993 - present, Vice-President - 1998 (estimate) present (see attached).

Local issue - see attached:

I have written several letters to the "Topeka Capital Journal" and one to "Topeka Metro News" – I kept no copies.

I do not know what particular skills are required as I do not know what the job entails. But, I am open-minded, honest and able to dissent when necessary, able to work well with people.

Concerned litigens is not active now. I am prisently Treasurer of Catholics for Renewal. (See prochure)

Son – Senior Adult Probation Officer, Lincoln, Nebraska (Steven R. Jung).

Son-In-Law - Michael J. Purcell - State of Kansas.

STATE OF KANSAS



KANSAS GOVERNMENTAL ETHICS COMMISSION

<u>STATEMENT OF SUBSTANTIAL INTERESTS FORM</u>

INSTRUCTIONS. This statement (pages I through 4) must be completed by individuals who are required to do so by law. Any individual who intentionally fails to file as required by law, or intentionally files a false statement, is subject to prosecution for a class B misdemeanor.

Please read the "Guide" and "Definition" section provided with this form for additional assistance in completing sections "C" through "G". If you have questions or wish assistance, please contact the Commission office at 109 West 9th, Topeka, KS or call 785-296-4219.

West 9th, Topeka, KS or call 785-296-4219.
A IDENTIFICATION: PLEASE TYPE OR PRINT
SCHNELLBACHER JANE (ANN) S'LHNEIDER Last Name First Name MI
Last Name First Name MI
OTTO O. SCHNELLBACHER SR.
PDO (188 & 14 struct
JOID SN BOWMAN CT
Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number
TO DEKA KANSAS 66604
TO PEKA KANSAS 66604 City, State, Zip Code
785-273-1909 N/A Business Phone Number (include area code) Business Phone Number (include area code)
Home Phone Number (include area code) Business Phone Number (include area code)
B. THIS FORM IS REQUIRED TO BE FILED BECAUSE YOU ARE: (check one or more of the following) 1. State Elected Official (Governor, Lt. Governor, Attorney General, Commissioner of Insurance, State Treasurer, Secretary of State, State Senator, State Representative, Member of State Board of Education or District Attorney); 2. Appointed Member of a State Board, Council, Commission or Authority, 3. Appointed State Position is Subject to Senate Confirmation; 4. Employee of a State Agency or University; 5. General Counsel for a State Agency; 6. Candidate for State Office. **MANSAS** BANKING** BOAR D **Ist Name** of Agency, Board, University or Elected Position (You may use abbreviations but not acronyms)
Division if applicable (May use acronyms) Position
The last four digits of your social security number will aid in identifying you from others with the same name on the computer list. This information is optional.

OWNERSHIP INTERESTS: List any corporation, partnership, proprietorship, trust, joint venture and every other business interest, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned within the preceding 12 months a legal or equitable interest exceeding \$5,000 or 5%, whichever is less. If you or your spouse own more than 5% of a business, you must disclose the percentage held. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "C", check here

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BUSINESS NAME AND ADDRESS		TYPE OF BUSINESS	- ,	DESCRIPTION OF INTERESTS EELD	PERCENT OF OWNERSHIP INTERESTS	MHOW BA HELD
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D. <u>GIFTS OR HONORARIA</u>: List any person or business from whom you or your spouse either individually or collectively, have received gifts or honoraria having an aggregate value of \$500 or more in the preceding 12 months.

If you have nothing to report in Section "D", check here

	NAME OF PURSON OF BUSINESS FROM WEOM GIFT RECEIVED		ADDRESS	SECEIVED BY:
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Ŧ	RECEIPT OF COMPENSATION: List all places of employment in the last calendar year, and any
	of a language from which you or your spouse received \$2,000 or more in compensation (see a), using we
	value, or economic benefit conferred on in return for services rendered, or to be rendered, without was
	reportable as taxable income on your federal income tax returns.

1.	YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN CALENDAR YEAR. IF SAME AS SECTION "B", CHECK HERE	THE PR	ECEDING
	If you have nothing to report in Section "E"1, check here	8	

	NAME OF BUSINESS		ADDRESS	TYPE OF BUSINESS
A CONTRACT OF THE PARTY OF THE	NAME OF BOOMARS	1		
		1		!

2. SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR

If you have nothing to report in Section "E"2, check here _____.

NAME OF BUSINESS		ADDRESS	TYPE OF BUSINESS
MAME OF BOOMER	The state of the s		

F. OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position of officer, director, associate, partner or proprietor at the time of filing, irrespective of the amount of compensation received for holding such position. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "F", check here _____.

	BUSINESS NAME AND ADDRESS	POSITION HELD	HELD BY WHOM
CATHO	LICE FOR RENEWAL	TREAS.	JANE
		 1 / // 2 // 3 /	
2.			
3.			
<u>.</u>			
5-			
ő.			
<u>S</u> _			1-34

G. RECEIPT OF FEES AND COMMISSIONS: List each client or customer who pays fees of commissions to a business or combination of businesses from which fees or commissions you or your spouse received an aggregate of \$2,000 or more in the preceding calendar year. The phrase "client or customer" relates only to businesses or combination of businesses. In the case of a partnership, it is the partner's proportionate share of the business, and hence of the fee, which is significant, without regard to expenses of the partnership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report under this provision. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "G", check here _____.

NAME OF CLIENT / CUSTOMER.	ADDRESS RECTIVED BY
AMERILAN UNITED LIFE INS. Co.	1 AMERCAN SQUARE BOX368 SPOUSE
= (RENEWAL SERVICE FEES)	INDIANAPULIS, IND
3. INDIANAPOLIS LIFE INS. Co.	INDIANAPELIS, IND Spouse
4 (SERVICE FEES	
5.	
6.	
7	
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13.	

declare that this statement of substantial interests (including accompanying pages and statements) has been examined by me and to the best of my knowledge and believe, correct and complete statement of all of my substantial interests and other matters required by law understand that the intentional failure to file this statement as required by law or intentionally filing a failure to file this statement as required by law or intentionally filing a failure to file this statement as required by law or intentionally filing a failure to file this statement as required by law or intentionally filing a failure to file this statement as required by law or intentionally filing a failure to file this statement as required by law or intentionally filing a failure to file this statement as required by law or intentionally filing a failure to file this statement as required by law or intentionally filing a failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement as required by law or intentional failure to file this statement.	
statement is a class B misdemeanor.	I
Date Date	

Return your completed statement to the Secretary of State, Memorial Hall, First Floor, 120 SW 10th Ave., Topeka,

Kansas 56612-1594.

Senate Confirmation Information Summary

Prepared and Submitted by the Office of Governor Kathleen Sebelius

Appointee: Joseph Smith

Position: Member, State Banking Board

Appointment Date: April 20, 2006 Expiration Date: March 15, 2009

Term Length: 3 years

Statutory Authority: K.S.A. 74-3004 Party Affiliation: Democrat

⇒ Statutory geographic representation Congressional District: Of the six banker members, the

Governor shall appoint one from each Kansas congressional district and the remainder from the state at

large.

Requirements (insert any that apply)

County:

Size requirement (if any):

Other, specify:

⇒ Statutory party affiliation requirement: Not more than five members of the board shall be

members of the same political party.

⇒ Statutory industry or occupation requirements: Bankers with at least 5 years experiences in a state

bank in Kansas and public members with no

connection to banking.

Salary: Predecessor: himself -- reappointed

Board Composition Prior to Confirmation of New Appointee:

See Attached List

State Banking Board

			C					
Gov Appts:	9	Term Length: Three Years	Three Years	Con	Contact:	Judi M. Stork,	Judi M. Stork, Deputy Commissioner	issioner
Total Appts:	9	Notes:	Limit of 2 terms; 6 bankers at least 5 years experience in a state bank in Kansas: 1 banker from each CD; the	perience CD; the		Office of the Bank Commis 700 SW Jackson, Suite 300	Office of the Bank Commissioner 700 SW Jackson, Suite 300	oner
			rest at-large members.	Zi.		Topeka, KS 66603-3796	56603-3796	
			nonbanker member shall concurrently serve as an	N N				
			officer or director in any state or national bank or trust	or trust				
			company wherever located.					
Statute:	KSA 74-3004		Confirmation: ✓ Gov Appt Counts	Counts Male/Female		1st2nd3rd4th	R/D/U	Board Active 🗸
Party Ratio:	5:4			8:1		2:2:3:2	2:5:2	
	** Member fully assume	d duties but awaits cor	** Member fully assumed duties but awaits confirmation by the Full Senate					

Work 316-942-4848	Wichita, KS 67208	3921 Pine Knot Ct.	Bias, Mr. Andrew L.	
Succeeds: Jane A. B	Position: a member		Sedgwick	County
3ateman	7		IJ	Affiliation
			4	CD
			84h	H
			29s	N
			6/30/2004	Appointment Date
			3/15/2007	Expiration Date
			<	Reapt
	Work 316-942-4848 Succeeds: Jane A. Bateman	848	848	Sedgwick D 4 84h 29s 6/30/2004 3/15/2007 Position: a member Succeeds: Jane A. Bateman

Ellis, KS 67637	1503 Lakeview St.	Downing, Mr. Michael R.	abias@mennonitehousing.com
Position: a member		Ellis I	Seat #: 005
		\vdash	
		110h	
		37s	
		10/18/2005	
		3/15/2008	
			Ellis I 1 110h 37s 10/18/2005 : Position: a member

<

Statutory Remarks: Public Member; cannot serve as officer or director of any bank

Nominations:

785-726-4531

Appointed By: Governor

Nominations:

Fax Home

mdowning@ellisstatebank.com

785-623-3645 785-726-3795 Fax

316-518-5242 316-942-0190

		<u>C</u> 0	ounty Aff	<u>filiation</u>	<u>CD</u>	$\underline{\mathbf{H}}$	<u>s</u>	Appointment Date	Expiration Date	Reapt
Minor, M	Ir. Melvin	Sta	afford	D	1	114h	33s	10/18/2005	3/15/2008	✓
1338 N	E 10th St.									
Stafford	l, KS 67578	Position:	a member							
Cell	(620) 546-3328	Succeeds:	Dan R. Peterso	on						
Home	(620) 234-5887	Appointed By:	Governor							
cdmino:	r@southwind.net	Nominations:								
		Statutory Remarks:	Public Membe	r; cannot	serve a	s office	er or d	irector of any bank		
		Seat #:	008							
O'Sulliva	n, Mr. James G.	Jol	nnson	U	3	28h	11s	6/30/2004	3/15/2007	✓
12608 (Cambridge Rd									
Shawne	e Mission, KS 66209	Position:	a member							
Work	913-319-0351	Succeeds:	Steve A. McSp	oadden						
Home	913-469-1075	Appointed By:	Governor							
Fax	913-319-0322	Nominations:								
josulliv	an@midwesttrust.com	Statutory Remarks:	At-Large Bank	er Membe	er					
		Seat #:	003							
Parman, l	Mr. Mark C.	Joh	nnson	D	3	20h	11s	7/1/2003	3/15/2006	✓
10220	Catalina									
Overlan	d Park, KS 66207	Position:	a member							
Work	(913) 239-1564	Succeeds:	Bruce B. Morg	gan						
Home	913-381-1891	Appointed By:	Governor							
Fax	(913) 851-2014	Nominations:								
Cell	(913) 645-9047	Statutory Remarks:	Third District l	Banker M	ember					
mparma	n@solutionsbank.com	Seat #:	007							
Rucker, N	Mr. Richard D.	Gree	nwood	R	4	76h	16s	6/30/2004	3/15/2007	
1644 P	Road□P.O. Box 367									
Eureka,	KS 67045	Position:	a member							
Work	620/583-5516	Succeeds:	himself reap	pointed						
Home	620/583-5316	Appointed By:	Governor							
Fax	620/583-5411	Nominations:								
Dick@F	Fox-net.net	Statutory Remarks:	Fourth District	Banker M	1embe	r				
		Seat #:	004							

		<u>Co</u>	ounty Affilia	tion CD	$\underline{\mathbf{H}}$	<u>S</u>	Appointment Date	Expiration Date	Reapt
Schnellba	acher, Mrs. Jane A.	Sha	iwnee D	2	55h	20s	10/27/2003	3/15/2006	✓
2010 S.	W. Bowman Court								
Topeka	, KS 66604	Position:	a member						
Home	785-273-1909	Succeeds:	H. Allan Caldwell	l					
otto66@	webtv.net	Appointed By:	Governor						
		Nominations:							
		Statutory Remarks:	Public Member; c	annot serve a	as office	r or d	lirector of any bank		
		Seat #:	006						
Smith, M	Ir. Joseph A.	Ne	eosho D	2	8h	14s	9/17/2003	3/15/2006	✓
19600 T	Udall Road								
Erie, K	S 66733	Position:	a member						
Fax	(620) 449-2828	Succeeds:	Gary J. Cinotto						
Cell	(629) 820-1369	Appointed By:	Governor						
Work	(620) 354-6435	Nominations:							
Home	(620) 754-3870	Statutory Remarks:	Second District B	anker Memb	er				
		Seat #:	002						
Winter, J	Ir., Mr. Winton A.	Do	ouglas R	3	44h	2s	10/18/2005	3/15/2008	✓
737 Ind	liana								
Lawren	ice, KS 66044	Position:	a member						
Work	785-842-4004	Succeeds:	Nancy A. Taylor						
Home	785-843-4479	Appointed By:	Governor						
Fax	785-842-5842	Nominations:							
Cell	785-218-9915	Statutory Remarks:	At-Large Banker	Member					

Seat #: 001

wwinter@epeoples.com

Joseph A. Smith

Age: 54 19600 Udall Road Erie, Kansas 66733 Married: 3 sons, 1 daughter

Education

St. Paul High School, St. Paul, Kansas
Graduate, 1969
Labette County Community College, Parsons, Kansas
Associate Degree in Liberal Arts, 1971
Pittsburg State University, Pittsburg, Kansas
B.S. in Business Administration, 1973
Colorado School of Banking, University of Colorado
Sponsored by Colorado Bankers Association, 1974-1976
School of Agriculture, Kansas State University
Sponsored by Kansas Bankers Association, 1975

Experience

Garnett State Savings Bank, Garnett, Kansas
Senior Vice President, 2003-present
Farmers National Bank of Kansas, Walnut, Kansas
President and Director, June 1996-present
The Stark State Bank, Stark, Kansas: May 1973-June 1996
Executive Vice President and Director
Chetopa State Bank & Trust, Chetopa, Kansas: Mar 1982-Jan 1992
Vice President and Director
First State Bank of Thayer, Thayer, Kansas: Aug 1984-Jan 1992
Executive Vice President and Director
First Neodesha Bank, Neodesha, Kansas: Sept 1984-Jan 1992
President and Director
Bank of Commerce, Chanute, Kansas: May 1985-Jan 1992
Director

Personal and Civic Activities:

Member of the St. Francis Catholic Church, Member Kansas State Banking Board, Walnut Ruritan National Club, and Grant Community Club in Stark.

Past Memberships: Ruritan National Club in Stark, Neosho County 4-H Council, Community and Project Leader for local 4-H Club, Neodesha Industrial Commission, Neodesha Foundation, Parsons Babe Ruth Association, Thayer Booster Club, and the Wichita Catholic Diocesan Rural Crisis Council, and the St. Francis Parish Council.

Hobbies:

An avid sports fan, I have participated in competitive softball and basketball for the past thirty years, Also, I have been active in sponsoring and coaching youth programs for a similar period.

Brief Summary of Banking Career and Experiences

I began my career at Stark in May, 1973 as an Agriculture Representative working in all areas of the operation. This being a small bank, I received experience in lending, including consumer, commercial and agricultural loans. I was elected Executive Vice President and a Director in 1980.

In March of 1982, I accepted the responsibility of representing the holding company in management of the bank at Chetopa which included attending loan meetings, farm and commercial credit appraisals, and working with problem loans. Also, I have been active several times in the day to day operations of the bank during management changes.

The First State Bank of Thayer was purchased in August of 1984 from FDIC after its closing. Immediately, I assumed management of the operation along with reorganizing the bank's assets. This required extensive credit analyzing, appraisals, and many customer meetings regarding deposits and loans.

In September of 1984, the purchase of the First National Bank of Neodesha was finalized. I became President with immediate responsibilities of correcting weakness in loan management and operations. This bank was a new and different experience for me as it involved many industrial customers.

Currently, I am managing the Farmers National Bank of Kansas in Walnut, Kansas with branches in St. Paul and Hepler. I believe the most important element is my experience which has provided training at various levels of banking.

Other Experiences

I have been involved in a farming partnership dealing mainly with livestock for the past 35 years.

I have worked with real estate sales for approximately 25 years as a salesman and broker, now owning my own agency, Joe Smith Realty.

Although not real active at this time, I maintain insurance licenses for property and casualty, health and life.

References

Eugene "Corky" Beachner Beachner Companies St. Paul, Kansas

Robert Grant State Representative State Capitol Building Topeka, Kansas

R. J. Breidenthal First Community Bank 4400 Shawnee Mission Parkway Fairway, Kansas Robert Hosack Neosho County Democratic Chairman Chanute, Kansas

H. Miles Smith HMS Enterprises, Inc. Brazilton, Kansas

Herbert E. Iams Kansas Bankers Association Topeka, Kansas

(for Appointments	Office us	e only)	
KBI Check: _	NA	In Process	Complete

KANSAS GOVERNOR SEBELIUS APPOINTMENT QUESTIONNAIRE

Position for which you are applying:STATE BANKING BOARD
Full Name (please include title and middle name):JOSEPH ALONZO SMITH, JR.
Home Address: 19600 Udall Road Erie, Kansas 66733 Neosho (City, State, Zip) (County)
Business Address: Box 129 Walnut, Kansas 66780 Crawford (City, State, Zip) (County)
Business Name: Farmers National Bank of Kansas
Position Title: President 620-354-6435 Home Phone: 620-754-3870 Business Phone: 620-449-2800 Cell Phone: 629-820-1369
Facsimile No: 620-449-2828 E-Mail Address:
Driver's License No:Social Security No:
Date of Birth: 4/2/51 Place of Birth: Parsons, Kansas Kansas resident? yes
Registered Voter? Party Affiliation: Democrat
Congressional District: 2nd Kansas Senate District: 14th Kansas Representative District: 8th
Do you have the legal right to live and work in the United States?yes
Education: BSBA - Kansas State College, Pittsburg, Kansas
Employment Experience: I have worked in banking since May, 1973.
Do you hold any professional licenses? If so, please provide numbers: KS REAL ESTATE BROKER #BR0001525 KS INSURANCE LICENSE #515507033-
What special skills could you bring to this position? I have been working in the banking field for thirty-three years. My experience includes all levels of banking operations. Also, I helped reopen two failed institutions, have opened two new branch facilities, and worked at eight different locations.
Previous government appointments: STATE BANKING BOARD (Please provide dates)

EXPERIENCE AND AFFILIATIONS (Note: All yes answers require a detailed response. Attach a separate sheet if necessary.)

1.	Military Service	: List rank,	date, and	type of	discharge	from	active	service:
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- 2. Government Experience: List on a separate sheet any experience or association with local, state or federal government (exclusive of elective public office but including advisory, consulting, honorary, or other part-time service or positions), with dates of service:
- 3. Elective Public Office: List on a separate sheet all elective public offices sought and/or held with dates of service:
- 4. **Honors and Awards**. List on a separate sheet all scholarships, fellowships, honorary degrees, honorary society memberships, and any other special recognitions for outstanding service or achievements:
- Organization Affiliations. List on a separate sheet all local, state, and national civic, cultural, educational, charitable, or work-related organizations you have been associated with in the past ten years. Include any position held in the organization and the dates of service.
- 6. Organization Restrictions: To your knowledge, is any organization listed above restricted on the basis of race, color, religion, sex, national origin, disability, marital status, or veteran status? If yes, please describe: No X Yes Yes
- 7. **Issues**. Have you ever been publicly identified, in person or by organizational membership, with a particularly controversial national or local issue? If so, please describe. No x Yes____
- 8. Submission of views. Have you ever submitted oral or written views to any governmental authority, whether executive or legislative, or to the news media on any particular controversial issue other than in an official governmental capacity? If yes, please describe. No X Yes
- 9. **Associations**. Have you ever had any association with any person, group, or business venture that could be used, even unfairly, to impugn or attack your character and qualifications for the position to which you seek to be appointed? If yes, please describe. No X Yes _____
- Opposition. Do you know of any person or group who might take overt or covert steps to attack, even unfairly, your appointment? If yes, please identify and explain the basis for the potential attack on a separate sheet. No X Yes____
- 11. **Miscellaneous**. List on a separate sheet any factors, other than the information provided above, which particularly qualify you or are relevant to the position to which you are seeking appointment? Include any special skills.

CONFLICTS OF INTEREST: (Yes answers require a detailed response. If necessary, use a separate sheet.)

scpa	(ate sheet.)
12.	Relationship to governmental employees. Are you or your spouse or other close family members related to any state governmental official or employee? If yes, please provide details. No_X_Yes
13.	Compensation. During the past five years have you or your spouse or other close family members received any compensation or been involved in any financial transaction with the State of Kansas? If yes, please explain. No_X Yes
14.	Business relationships. Describe on a separate sheet any business relationship, dealing, or financial transaction which you have had during the last five years, whether for yourself, on behalf of a client, or acting as an agent, which you believe may constitute an appearance of impropriety or result in a potential conflict of interest in the position to which you want to be appointed. If none, please so stateNone
15.	Transactions with officials. During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with any state government official? If, yes, please explain on a separate sheet. No x Yes
16.	Spouse or other family members. If the nature of employment for your spouse or other close family member is related in any way to the position to which you want to be appointed, please indicate the employer, the position, and the length of time it has been held. If it is not, please so stateNO
17.	Lobbying activities. Describe briefly on a separate sheet any lobbying activity during the past ten years in which you have engaged for the purpose of influencing the passage, defeat, or modification of any legislative or administrative action. Describe briefly any lobbying activity during the last ten years in which your spouse has engaged for the purpose of influencing the passage, defeat, or modification or any legislative or administrative action that is related in any way to the position to which you are seeking appointment. (Lobbying activity includes any activity performed as an individual or agent of another individual, or of any organization that involves direct communication with an official in the executive branch of state government, or any official of the legislative branch.) If none, please so state. None
18.	Regulated activities. Describe on a separate sheet any interest that you, your spouse, or other close family member may have (whether as an officer, owner, director, trustee, or partner) in an corporation, firm, partnership, or other business enterprise and any non-profit organization or other institution that is regulated by or receives direct financial benefits from any department or agency of the State of Kansas. If none, please so state. None
19.	Other. Please describe on a separate sheet any other matter in which you are involved that is or may be incompatible or in conflict with the discharge of the duties of the position to which you seek to be appointed or which may impair or tend to impair your independence of judgment or action in the performance of the duties of that position. If none, please so state. None

ETHICAL MATTERS:	(Yes answers require a detailed response.	If necessary, use a separate
sheet.)		

20.	Citations. Have you ever been cited for a breach of ethics for unprofessional conduct by, or been named in a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group? If yes, please provide details. No _X _Yes
21.	Convictions. Have you ever been convicted of or entered a plea of guilty or nolo contendere or forfeited collateral for any criminal violation other than a minor traffic offense? (Minor traffic offenses do not include the Kansas offenses of driving under the influence, operating while impaired, reckless driving, or the equivalent offenses in other states.) If yes, please explain. No <u>X</u> Yes
22.	U.S. Military convictions. Have you ever been convicted by any military court? If yes, please provide details. Nox Yes
23.	Imprisonment. Have you ever been imprisoned, been on probation, or been on parole? If yes, please provide details. No <u>X</u> Yes
24.	Agency proceedings: Civil Litigation. Are you presently, or have you ever been, a party in interest in any administrative agency proceeding or civil litigation that is related in any way to the position to which you are seeking appointment? If yes, please provide details. No_x Yes
25.	Agency proceedings and civil litigation of affiliates and family. Has any business in which you, your spouse, close family member or business associate are or were an officer, director or partner been a party to any administrative agency proceeding or civil litigation relevant to the position to which you are seeking appointment? If yes, please provide details. (With respect to this question, you need only consider proceedings and litigation that occurred while you, your spouse, close family member, or business associate were an officer of that business.) No_X Yes
26.	Other litigation. Other than the litigation described above, have you or any business in which you are or were an officer, director, or partner been a plaintiff or a defendant in a civil lawsuit? If yes, please describe. Is anyone currently threatening to sue you or any business in which you are an officer, director, or partner? If yes, please describe. No_x_Yes
27.	Drivers license . Has your drivers license ever been suspended or revoked? If yes, please describe. No x Yes
28.	Parking tickets. Do you have outstanding parking tickets from any jurisdiction in Kansas that have remained unpaid for more than 60 days? If yes, please explain. No X Yes
29.	Security clearance denial. Have you ever been denied a military or other governmental clearance? If yes, please explain. No X Yes

30.	Firings. During the past ten years, after being told that you would be a specific problems? If yes, please p	fired, or did you leave by r	nutual agreement because of			
31.	Alimony and child support. Are y alimony or child support? If yes, p	vou now, or have you ever lease provide details. No_	been delinquent in the payment of X_Yes			
32.	Consumption of alcohol. Are you	currently abusing alcohol	? No_X_Yes			
33.	Controlled substances. Are you can abusing the use of a prescribed controlled substances.	nrently engaged in the ille trolled substance? If yes,	egal use of a controlled substance of please describe. No $\frac{X}{X}$			
34.	Physical examination. If you receive you be willing to take a physical examination.					
35.	Other. Please provide any additional information, favorable or unfavorable, which you feel should be considered in connection with your appointment.					
FINAI sheet.)	NCIAL MATTERS: (Yes answers	require a detailed respo	nse. If necessary, use a separate			
36.	Delinquencies. Are you delinquent for income, property, or other taxes payments into or under government government; plus any defaults on or subsidized by any unit of government paper. No x Yes Yes	governmental loans; over al programs; and other del under loans which are or	rpayment of benefits; required bts or required payments to the were guaranteed, insured, or			
REFE	RENCES/SIGNIFICANT SUPPO	RTERS (elected officials, o	community leaders, friends, etc.)			
Name:	Eugene "Corky" Beachner	Relationship to you:	Friend			
Telepho	one: 620-449-2286					
Name:	R. J. Breidenthal	Relationship to you:	Friend			
Telepho	one: 913-384-3300					
Name:	Robert Grant	Relationship to you:	Friend			
Telepho	one: 620-457-8496					
Name:	Robert Hosack	Relationship to you:	Friend			
Telepho	one: 620-431-9547					



KANSAS GOVERNMENTAL ETHICS COMMISSION

STATEMENT OF SUBSTANTIAL INTERESTS FORM

INSTRUCTIONS. This statement (pages 1 through 4) must be completed by individuals who are required to do so by law. Any individual who intentionally fails to file as required by law, or intentionally files a false statement, is subject to prosecution for a class B misdemeanor.

Please read the "Guide" and "Definition" section provided with this form for additional assistance in completing sections "C" through "G". If you have questions or wish assistance, please contact the Commission office at 109 West 9th, Topeka, KS or call 785-296-4219.

A. IDENTIFICATION:	PLEASE TYPE OR	PRINT	
Smith	Joseph		A
Last Name	First Name	MI	
Smith	Rebecca		S
Spouse's Name	Ī.		
	Udall Road	· · · · · · · · · · · · · · · · · · ·	
Number & Street Name, Apartn	nenț Number, Rural Route, or	P.O. Box Number	
Erie,	Kansas 66733		
City, State, Zip Code			
620-754-3870			449-2800
Home Phone Number (include a			aber (include area code)
State Elected Office State Treasurer, See Board of Education Appointed Member 3. Appointed State Po	e or more of the following) cial (Governor, Lt. Governor, coretary of State, State Senator a or District Attorney); or of a State Board, Council, Council of constitution is Subject to Senate Council a Agency or University; or a State Agency;	Attorney General, Com r, State Representative, Commission or Authority	Member of State
isi Name of Agency, Board, Univers	sity or Elected Position (You	may use abbreviations b	out not acronyms)
STATE BANKING BOARD		MEMB	ER
Division if applicable (May u	se acronyms)	Pos	sition
The last four digits of your sooname on the computer list. The	cial security number will aid in information is optional.	n identifying you from	others with the same

1-48

C. OWNERSHIP INTERESTS: List any corporation, partnership, proprietorship, trust, joint venture and every other business interest, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned within the preceding 12 months a legal or equitable interest exceeding \$5,000 or 5%, whichever is less. If you or your spouse own more than 5% of a business, you must disclose the percentage held. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "C", check here _____

BUSINESS NAME AND ADDRESS	TYPE OF BUSINESS	DESCRIPTION OF INTERESTS HELD	PERCENT OF OWNERSHIP INTERESTS	MHOW BA HEID
1 RDJ FARM 19600 Udall Road, Erie, KS	farming operation	partner	33 1/3	self
2 JOE SMITH REALTY 19600 Udall Road, Erie, KS	real estate agenc	y broker	100%	self
3. HOME INSURANCE AGENCY	crop insurance	partner	50%	self
Box 6, Walnut, KS		Q+		
5.				
5.				
7.				
8.				
9.				
10.				

D. <u>GIFTS OR HONORARIA</u>: List any person or business from whom you or your spouse either individually or collectively, have received gifts or honoraria having an aggregate value of \$500 or more in the preceding 12 months.

If you have nothing to report in Section "D", check here ____

NAME OF PERSON OR SUSINESS FROM WE	OM GIFT RECEIVED	ADDRESS	RECEIVED BY:
1.			
3-			1-49

	RECEIPT OF COMPENSATION: List all places of employment in the last calendar year	r, and any	_ £
臣.	RECEIPT OF COMPENSATION. List an piccos of \$2,000 or more in compensation (salary, thing o	91
	RECEIPT OF COMPENSATION: List all places of employment in the last official years of the last official years of the last official years of the last official yea	which was	
	Language Control Cit (III III John Language Lang		
	value, or economic benefit come to your federal income tax returns. Teportable as taxable income on your federal income tax returns.	a control of the control	

	OF THE PRECEDING
	YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING
1.	YOUR PLACE(S) OF EMPLOYMENT OR OF CHECK HERE CALENDAR YEAR. IF SAME AS SECTION "B", CHECK HERE
	CALENDAR YEAR. IF SAME AS SECTION IN THE SAME
	If you have nothing to report in Section "E"1, check here
	II AOU HAAO HOOTHING TO A I

It you have nouns	
	ADDRESS TYPE OF BUSINESS
NAME OF BUSINESS	Box 129, Walnut, KS Banking
1. FARMERS NATIONAL BANK OF KANSAS	19600 Udall Road, Erie, KS Real Estate Sales
2. JOE SMITH REALTY	1 TANA MILLER TO I CO

SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR.

If you have nothing to report in Section "E"2, check here _____

	TYPE OF BUSINESS
NAME OF BUSINESS	ADDRESS ITTE OF STATE
Section of the second section of the second	
_ <u> </u>	1
7	TO CHOICE

OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position of officer, director, associate, partner or proprietor at the time of filing, irrespective of the amount of compensation received for holding such position. Please F. insert additional page if necessary to complete this section.

If you have nothing to report in Section "F", check here _____.

п јод ш		
医的原来式冷叶平均至 指	POSITION HELD	HELD BY WHOM
BUSINESS NAME AND ADDRESS FARMERS NATIONAL BANK OF KANSAS	PRESIDENT/DIRECTOR	SELF
BOX 129, WALNUT, KANSAS 66780	PARTNER	SELF
2. RDJ FARM 19600 UDALL ROAD, ERIE, KANSAS 66733 HOME INSURNACE AGENCY	PARTNER	SELF
BOX 6, WALNUT, KANSAS 66780 4. GARNETT STATE SAVINGS BANK 4. GARNETT STATE SAVINGS BANK	SR. V. P.	SELF
BOX 329, GARNETT, KANSAS GOOSE	BROKER	SELF
JOE SMITH REALTY 19600 UDALL ROAD, ERIE, KANSAS 66733		
ő.		
7.		
3.		1-50

P. 0%

G. BECEPT OF FIES AND COMMISSIONS: List each client or customer who pays less or commissions to a business or combination of businesses from which fees or commissions you or your spouse received an aggregate of \$2,000 or more in the preceding calendar year. The phrase "client or customer" relates only to ousinesses or combination of businesses. In the case of a partnership, it is the partner's proportionate share of the business, and hence of the fee, which is significant, without regard to expenses of the partnership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report under this provision. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "G", check here XX.

\$ 100 h	HAME OF CENENT! CUSTOMER	ADDRH98	RECEIVED 3 Y
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<u>.</u>		 The state of the s	

H DECLARATION:

I JOSEPH A. SMITH	declare that this statement of substantial interests (including any
accompanying pages and statementa)) has been examined by me and to the best of my knowledge and belief is a
	of all of my substantial interests and other matters required by law. I
understand that the intentional failure	to file this statement as required by law or intentionally filing a false
statement is a class B misdemeanor.	

Mach 20, 2006

Manahire of Person Making Statement

NUMBER OF ADDITIONAL PAGES

Remin your completed statement to the Secretary of State, Manuallal Hall, First Floor, 120 SW 10th Ave., Topelm, Xansas 68612-1594.

Senate Confirmation Information Summary

Prepared and Submitted by the Office of Governor Kathleen Sebelius

Appointee: Mark Parman

Position: Member, State Banking Board

Appointment Date: April 20, 2006

Expiration Date: March 15, 2009

Term Length: 3 years

Statutory Authority: K.S.A. 74-3004 Party Affiliation: Democrat

⇒ Statutory geographic representation Congressional District: Of the six banker members, the

Governor shall appoint one from each Kansas congressional district and the remainder from the state at

large.

Requirements (insert any that apply)

County:

Size requirement (if any):

Other, specify:

⇒ Statutory party affiliation requirement: Not more than five members of the board shall be

members of the same political party.

⇒ Statutory industry or occupation requirements: Bankers with at least 5 years experiences in a state

bank in Kansas and public members with no

connection to banking.

Salary: Predecessor: himself -- reappointed

Board Composition Prior to Confirmation of New Appointee:

See Attached List

State Banking Board

	Gov Appts:	9	Term Length:	Three Years				Cor	ntact:	Judi M. Stork	, Deputy Comr	nissioner
Total Appts: 9 Notes: Limit of 2 terms; 6 bankers at least 5 years experied in a state bank in Kansas: 1 banker from each CD; rest at-large members. 3 public members no connection to banking. No nonbanker member shall concurrently serve as an officer or director in any state or national bank or company wherever located.			CD; the No an			Office of the Bank Commissioner 700 SW Jackson, Suite 300 Topeka, KS 66603-3796 785/296-2266						
	Statute:	KSA 74-3004		Confirmation:	V	Gov Appt	Counts	Male/F	-emale		R/D/U	Board Active 🗸
	Party Ratio:	5:4						8	: 1	2:2:3:2	2:5:2	
		** Member fully assume	d duties but awaits co	nfirmation by the Full	Senate							-
					County	<u>Affiliation</u>	<u>CD</u>	<u>H</u>	<u>s</u>	Appointment Date		
	Bias,	Mr. Andrew L.			Sedgwick	D	4	84h	29s	6/30/2004	3/15/2007	\checkmark
	3921	Pine Knot Ct.										
	Wic	hita, KS 67208		Pos	ition: a memb	er						
	Wor	k 316-942-4848		Succ	eeds: Jane A.	Bateman						
	Hon	ne 316-688-5378		Appointed	d By: Governo	or						
	Fax	316-942-0190		Nominat	tions:							
	Cell	316-518-5242		Statutory Rem	arks: Public N	Member; cannot	serve a	as offic	er or d	irector of any bank		
	abia	s@mennonitehousing.	.com	Se	eat #: 005							
	Down	ing, Mr. Michael R.			Ellis	I	1	110h	37s	10/18/2005	3/15/2008	\checkmark
	1503	B Lakeview St.										
	Ellis	, KS 67637		Pos	ition: a memb	er						
	Wor	k 785-726-3113		Succ	eeds: Michael	l D. Stevens						
	Hon	ne 785-726-4531		Appointe	d By: Govern	or						
	Fax	785-726-3795		Nominat	tions:							
	Cell	785-623-3645		Statutory Rem	arks: First Di	strict Banker M	ember					
	mdo	wning@ellisstatebank	c.com	S	eat #: 009							

		<u>Cc</u>	ounty	Affiliation	<u>CD</u>	<u>H</u>	<u>s</u>	Appointment Date	Expiration Date	Reapt
Minor, N	Ar. Melvin	Sta	ıfford	D	1	114h	33s	10/18/2005	3/15/2008	✓
1338 N	IE 10th St.									
Staffor	d, KS 67578	Position:	a member							
Cell	(620) 546-3328	Succeeds:	Dan R. Pete	erson						
Home	(620) 234-5887	Appointed By:	Governor							
cdmino	or@southwind.net	Nominations:								
		Statutory Remarks:	Public Mem	ber; cannot	serve a	s office	er or d	irector of any bank		
		Seat #:	008							
O'Sulliva	an, Mr. James G.	Jol	nnson	U	3	28h	11s	6/30/2004	3/15/2007	✓
12608	Cambridge Rd									
Shawn	ee Mission, KS 66209	Position:	a member							
Work	913-319-0351	Succeeds:	Steve A. Mo	cSpadden						
Home	913-469-1075	Appointed By:	Governor							
Fax	913-319-0322	Nominations:								
josulliv	van@midwesttrust.com	Statutory Remarks:	At-Large Ba	anker Memb	per					9
		Seat #:	003							
Parman,	Mr. Mark C.	Jol	nson	D	3	20h	11s	7/1/2003	3/15/2006	~
10220	Catalina									
Overla	nd Park, KS 66207	Position:	a member							
Work	(913) 239-1564	Succeeds:	Bruce B. M	organ						
Home	913-381-1891	Appointed By:	Governor							
Fax	(913) 851-2014	Nominations:								
Cell	(913) 645-9047	Statutory Remarks:	Third Distri	ct Banker N	1ember					
mparm	an@solutionsbank.com	Seat #:	007							
Rucker,	Mr. Richard D.	Gree	enwood	R	4	76h	16s	6/30/2004	3/15/2007	
1644 P	Road□P.O. Box 367									
Eureka	, KS 67045	Position:	a member							
Work	620/583-5516	Succeeds:	himself re	eappointed						
Home	620/583-5316	Appointed By:	Governor							
Fax	620/583-5411	Nominations:								
Dick@	Fox-net.net	Statutory Remarks:	Fourth Distr	rict Banker	Membe	r				
		Seat #:	004							

Schnellbacher, Mrs. Jane A.
2010 S.W. Bowman Court
Topeka, KS 66604
Home 785-273-1909
otto66@webtv.net

Smith, M	r. Joseph A.
19600 U	Jdall Road
Erie, KS	5 66733
Fax	(620) 449-2828
Cell	(629) 820-1369
Work	(620) 354-6435
Home	(620) 754-3870

Winter, J	r., Mr. Winton A.					
737 Ind	737 Indiana					
Lawren	ce, KS 66044					
Work	785-842-4004					
Home	785-843-4479					
Fax	785-842-5842					
Cell	785-218-9915					
wwinter	r@epeoples.com					

	unty 4	Affiliation D	<u>CD</u> 2	<u>Н</u> 55h	<u>S</u> 20s	Appointment Date 10/27/2003	Expiration Date 3/15/2006	Reapt
Position: Succeeds: Appointed By: Nominations:	H. Allan Ca	ldwell						
Statutory Remarks:	Public Mem	ber; canno	t serve a	s offic	er or d	lirector of any bank		
Seat #:		D	2	8h	14s	9/17/2003	3/15/2006	V
	a member Gary J. Cind Governor	otto						
Statutory Remarks:	Second Dist	trict Banke	r Memb	er				
Seat #: Do	002 uglas	R	3	44h	2s	10/18/2005	3/15/2008	V
100 P. C.	a member Nancy A. T Governor	aylor						

Statutory Remarks: At-Large Banker Member

Seat #: 001

Mark C. Parman

Experience

2004-Present

SolutionsBank

Overland Park, KS

President, Chief Executive Officer

- Joined the company in May of 2004 taking a significant ownership position in the bank. Brought in to implement a growth plan for the company with a short-term goal of reaching \$500 million in assets.
- Doubled assets and loans in less than two years and currently implementing a branch expansion strategy in the KC metropolitan area. Total assets are currently \$240 million.
- Implementing a commercial focus including the development of new products including cash management services, profitability model, mortgage lending.

1991-2004

Hillcrest Bank

Overland Park, KS

Chairman, Chief Executive Officer

- Lead Bank in growing from \$100 million in assets to over \$1.1 billion.
- Responsible for three mergers and two acquisitions.
- 13 consecutive years of growth in total assets, total loans, deposits, capital and earnings.

1983-1991

The Merchants Bank

Kansas City, MO

First Vice President

- Started and ran the Special Asset department and responsible for \$300 million in work our credits
- Responsible for a \$350 million commercial loan portfolio

1980-1983

Mark Twain Bank

Kansas City, MO

Assistant to the President

1979-1980

Patrons State Bank

Olathe, KS

1978-1979

Kansas City Bank & Trust Kansas City, MO

Education

1979-Rockhurst College, Avila College, UMKC, AIB

1976-1978

Odessa High School,

Odessa, MO

Organizations

2003 Appointed by Governor of KS to serve on the KS Banking Board

Currently serve as Chairman, Kansas State Banking Board

1998-2002 Region One KBA Board of Directors

2000-2004 Member ABA Peer Group 10 Member Overland Park Rotary Club

Member-Rolling Hills Presbyterian Church

Married-Julie 20 years

Personal

Two sons-Tyler 17, Bryan 15

Member-Hallbrook Country Club

Two dogs-Charlie, Lucy

Hobbies: Golf, Fishing, Reading, Coaching little league sports

(for Appointments	office use	e only)	
KBI Check: _	NA _	In Process _	Complete

KANSAS GOVERNOR SEBELIUS APPOINTMENT QUESTIONNAIRE

Position for which you are applying: STATE BANKING BOARD
Full Name (please include title and middle name): MARK CHARLES PARMAN
Home Address: 10220 CATALINA, OVERLAND PARIL KS, 66207 Jo.
Business Address: 7401 W. 135+L STRSST, OVERLAND PARK KS 66223 JO
Business Name: Solutions BANIL (City, State, Zip) (County)
Position Title: PRESIDENT, ChiEF EXECUTIVE OFFICER
Home Phone: 913.381.1891 Business Phone: 913.239.1564 Cell Phone: 913.645. 9047
Facsimile No: 913.851.2014 E-Mail Address: MPARMANE SOLUTIONSBANK.COM
Driver's License No:Social Security No:
Date of Birth: 5/25 60 Place of Birth: INDSPSNDENCE KS Kansas resident? YES
Registered Voter? YES Party Affiliation: DEMOCRAT
Congressional District: 3 Kansas Senate District: 11 Kansas Representative District: 20
Do you have the legal right to live and work in the United States? YES
Education: ODESSA MO. High School 1978 2 yrs collect, Rochhast
College, Avila College, JoCo Community College -
Employment Experience: So Lutions Bank 2 yes, Hillers T Bank Chairman CEO 13 4RS
7/91 to 5/04, MERCHANTS BANK 10+ 1.P. 12/13 to 7/91 MARK TWAIN BANK, PATRINS
7/91 to 5/04, MERCHANTS BANK 18T 1.P. 12/13 to 7/91) MARK TWAIN BANK, PATRINS STATE BANK, RANSAS CITY BANKE TRUST Do you hold any professional licenses? If so, please provide numbers: NON E
What special skills could you bring to this position? 27 45 Anking - 15 as CED
Previous government appointments: KS STATS BANKING BEARD 3/03 3/06 (Please provide dates) (This Position)
(Please provide dates) (This Position)

CONFLICTS OF INTEREST: (Yes answers require a detailed response. If necessary, use a separate sheet.)

- 12. Relationship to governmental employees. Are you or your spouse or other close family members related to any state governmental official or employee? If yes, please provide details.

 No_Yes____
- Compensation. During the past five years have you or your spouse or other close family members received any compensation or been involved in any financial transaction with the State of Kansas? If yes, please explain. No Yes X KS STATS BANKING BURND This Position
- Business relationships. Describe on a separate sheet any business relationship, dealing, or financial transaction which you have had during the last five years, whether for yourself, on behalf of a client, or acting as an agent, which you believe may constitute an appearance of impropriety or result in a potential conflict of interest in the position to which you want to be appointed. If none, please so state.
- 15. **Transactions with officials**. During the past five years, have you or your spouse or other close family members received any compensation or been involved in any financial transaction with any state government official? If, yes, please explain on a separate sheet. No X Yes Yes
- Spouse or other family members. If the nature of employment for your spouse or other close family member is related in any way to the position to which you want to be appointed, please indicate the employer, the position, and the length of time it has been held. If it is not, please so state.
- Lobbying activities. Describe briefly on a separate sheet any lobbying activity during the past ten years in which you have engaged for the purpose of influencing the passage, defeat, or modification of any legislative or administrative action. Describe briefly any lobbying activity during the last ten years in which your spouse has engaged for the purpose of influencing the passage, defeat, or modification or any legislative or administrative action that is related in any way to the position to which you are seeking appointment. (Lobbying activity includes any activity performed as an individual or agent of another individual, or of any organization that involves direct communication with an official in the executive branch of state government, or any official of the legislative branch.) If none, please so state. Banks I have Exployed By
- Regulated activities. Describe on a separate sheet any interest that you, your spouse, or other close family member may have (whether as an officer, owner, director, trustee, or partner) in any corporation, firm, partnership, or other business enterprise and any non-profit organization or other institution that is regulated by or receives direct financial benefits from any department or agency of the State of Kansas. If none, please so state. Solutions Bank is Rqulation by The Us Bankens Commission, FDic, FEBERNI RESERVE OTHERWISE NONE.
- Other. Please describe on a separate sheet any other matter in which you are involved that is or may be incompatible or in conflict with the discharge of the duties of the position to which you seek to be appointed or which may impair or tend to impair your independence of judgment or action in the performance of the duties of that position. If none, please so state.

30.	Firings. During the past ten years, have you been fired from a job for any reason? Did you quit after being told that you would be fired, or did you leave by mutual agreement because of specific problems? If yes, please provide details. NoX_ Yes
31.	Alimony and child support. Are you now, or have you ever been delinquent in the payment of alimony or child support? If yes, please provide details. NoXYes
32.	Consumption of alcohol. Are you currently abusing alcohol? No_X_Yes
33.	Controlled substances. Are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If yes, please describe. No X Yes
34.	Physical examination. If you receive a conditional offer of appointment or employment, would you be willing to take a physical examination, which may include a drug test? NoYes_X
35.	Other. Please provide any additional information, favorable or unfavorable, which you feel should be considered in connection with your appointment.
FINAl	
36.	Delinquencies . Are you delinquent on any federal, state, or local debt? (Include delinquencies for income, property, or other taxes; governmental loans; overpayment of benefits; required payments into or under governmental programs; and other debts or required payments to the government; plus any defaults on or under loans which are or were guaranteed, insured, or subsidized by any unit of government.) If yes, please provide details on a separate sheet of paper. No Yes Yes
REFE	RENCES/SIGNIFICANT SUPPORTERS (elected officials, community leaders, friends, etc.)
Name	: GEURUE COULL Relationship to you: Chairman, Solutions Bank
Telepl	none: 913 - 239 - 1560
Name	: Relationship to you: FRIEND, HEARTLAND BANK
	none: 913-663-5656
Name	: DAN STEPP Relationship to you: FRIEND, BUS. Assoc., 60LD CAPITAL
Telep:	hone: 913 396 0310
Name	: John KEllER Relationship to you: ATTY FRIEND, BROWN & DUNN
Telep	hone: 8/6 292 7063

STATE OF KANSAS



KANSAS GOVERNMENTAL ETHICS COMMISSION

STATEMENT OF SUBSTANTIAL INTERESTS FORM

INSTRUCTIONS. This statement (pages 1 through 4) must be completed by individuals who are required to do so by law. Any individual who intentionally fails to file as required by law, or intentionally files a false statement, is subject to prosecution for a class B misdemeanor.

Please read the "Guide" and "Definition" section provided with this form for additional assistance in completing sections "C" through "G". If you have questions or wish assistance, please contact the Commission office at 109

West 9th, Topeka, KS or call 785-296	<u> 1219.</u>	
A IDENTIFICATION:	PLEASE TYPE OR P	RINT
PARMAN	MARK	
Last Name	First Name	MI
PARMAN	Julie	M
Spouse's Name		4
10220 CATA	LINA	
Number & Street Name, Apartmer	it Number, Rural Route, or P	P.O. Box Number
OVERLAND PAR	K, KS 60	207
City, State, Zip Code		
913.381.1891		3/3.239-1564
Home Phone Number (include area	ı code)	Business Phone Number (include area code)
B. THIS FORM IS REQUIRED		YOU ARE:
(check one o	r more of the following) (Governor, Lt. Governor, A	ttorney General, Commissioner of Insurance,
State Treasurer, Segre	etary of State, State Senator,	State Representative, Member of State
Board of Education of	r District Attorney); f a State Board, Council, Cor	mmission or Authority
	ion is Subject to Senate Con	
4. Employee of a State A	gency or University,	
5. General Counsel for a	State Agency;	
	ANKING BOI	ARD
ist Name of Agency, Board, University	or Elected Position (You man	av rise appreviations but not acconyms)
NIA		BOARD MEMBER
Division if applicable (May use	acronyms)	Position
The last form figure of your social	security number still aid in	identifying you from others with the same
ne last four digues of your social many on the computer list. This	information is optional	
-	<u>-</u>	J

OWNERSHIP INTERESTS. List any corporation, partnership, proprietorship, trust, joint venture and every other business interest, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned within the preceding 12 months a legal or equitable interest exceeding \$5,000 or 5%, whichever is less. If you or your spouse own more than 5% of a business, you must disclose the percentage held. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "C", check here _____

			1	
BUSINESS NAME AND ADDRESS	TYPS OF BUSINESS	DESCRIPTION OF INTERESTS HELD	PERCENT OF OWNERSHIP INTERESTS	MECM HELD
SOLUTIONS BANK - FIRST MEDICINE LUDGE BANGSHARES	KS BANK	of Stock	100%	Juliz PARMAN
2 SULUTIONS BONK 401 K PLAN	MUTUAL FUNDS (BURPALO FUNDS) 401 K	40111	10090	PARMAN
3. FIDELITY FUNDS	MUTUAL FUNDS	MUTHAL FUNDS	100%	MARK. Sulis PARMA
4 AMBRICAN FUNDS 529 ACCT.	529 FOR SONS CUISSE	mutuse Funds	100%	MARK. THISR PARMA
5. Amamican Funds 529 AceT	529 FOR SONS COLLSGE	MUTUAL FUNIDE	1003	MARIL. BRY 9N PARAM
5.				
7.				
8.				
9.				
10.				

D. GIFTS OR HONORARIA: List any person or business from whom you or your spouse either individually or collectively, have received gifts or honoraria having an aggregate value of \$500 or more in the preceding 12 months.

If you have nothing to report in Section "D", check here

MAME OF REGION OR BUSINESS FROM WEOM GUT RECEIVED	DESCRIPTION OF THE PROPERTY OF	ADDRESS	RECEIVED 3Y:
NAME OF SELECTION	<u> </u>		
			1-61

	and any
五.	RECEIPT OF COMPENSATION: List all places of employment in the last calendar year, and any
	o
	other businesses from which you if your spouse reduction and reduction of the period of the reduction of the services rendered, or to be rendered), which was value, or economic benefit conferred on in return for services rendered, or to be rendered), which was
	rely or economic penefit conferred on in return for services rendered, or to be remarked,
	Value, of coordina source of the compared references
	reportable as taxable income on your federal income tax returns.

 YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRE- CALENDAR YEAR. IF SAME AS SECTION "B", CHECK HERE 	
If you have nothing to report in Section "H"1, check here	

NAME OF BUSINESS	ADDRI	
SULUTION 3 BANK	7401 W. 135tz ST.	OPUS BANK
SULUTIONS		

SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING 2. CALENDAR YEAR If you have nothing to report in Section "E"2, check here

NAME OF BUSINESS ADDRESS		ADDRESS	TYPE OF BUSINESS
	NAME OF BUSINESS		

OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position of officer, director, associate, partner or proprietor at F. the time of filing, imespective of the amount of compensation received for holding such position. Please insert additional page if necessary to complete this section. If you have nothing to report in Section "F", check here

The state of the s	POSITION HELD	HELD BY WHOM
BUSINESS NAME AND ADDRESS SOLUTION BANK	PRIS. CEU	MARK PARMAN
#AIN 13CH OPKS 64273	Cac	MARK PARMON
FIRST BANK MEDICINE LUDGE BANGSAGESS	520.	
KANSOS STATZ BANK BUARD	BOARD	MARK PARMON
700 5.W. JACKSON SNITE 300 6663	13000	
	-	!
		/

RECEIPT OF FEES AND COMMISSIONS: List each client or customer who pays fees of G. commissions to a business or combination of businesses from which fees or commissions you or your spouse received an aggregate of \$2,000 or more in the preceding calendar year. The phrase "client or customer" relates only to businesses or combination of businesses. In the case of a parinership, it is the partner's proportionate share of the business, and hence of the fee, which is significant, without regard to expenses of the partnership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report under this provision. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "G", check here X

NAME OF CLIENT / CUSTOMER		ADDRESS	RECEIVED BY
The control of the co	_	,	
<u>.</u>			
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12.			
15.			

DECLARATION: F.

MARK C. PARMAN , declare that this statement of substantial interests (including any accompanying pages and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of all of my substantial interests and other matters required by law. I understand that the intentional failure to file this statement as required by law or intentionally filing a false statement is a class B misdemeanor.

7-6-1	Man
Date	Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES

Return your completed statement to the Secretary of State, Memorial Hall, First Floor, 120 SW 10th Ave., Topeka, Kansas 56612-1594.