

MINUTES OF THE SENATE ASSESSMENT AND TAXATION COMMITTEE

The meeting was called to order by Chairman David Corbin at 11:45 a.m. on April 1, 2004, in Room 519-S of the Capitol.

All members were present except:

Senator Barbara Allen- excused
Senator Greta Goodwin- excused
Senator Lana Oleen- excused
Senator Les Donovan- excused
Senator Mark Buhler- excused
Senator Mark Taddiken- excused
Senator Phillip Journey- excused

Committee staff present:

Chris Courtwright, Legislative Research Department
Martha Dorsey, Legislative Research Department
Gordon Self, Revisor of Statutes Office
Shirley Higgins, Committee Secretary

Conferees appearing before the committee:

Thomas H. Slack
Don R. Paxson

Others attending:

See Attached List.

Confirmation hearings on Thomas H. Slack and Don Paxson, Members, State Board of Tax Appeals

Noting that several committee members were not present because they were still in caucus, Senator Corbin opened the confirmation hearings. As to Mr. Slack, he commented that he appeared before the Committee earlier in the session at a confirmation hearing; however, there was some confusion after the hearing with regard to what term and what vacancy he would be filling on the Board. Since that time, the situation has been clarified. (Attachment 1) Mr. Slack stood for questions, but committee members present had no questions.

Mr. Paxson informed the Committee that he is a native Kansan, and he has two degrees from the University of Kansas--Bachelor of Science in Business and a J.D. in the School of Law. He has practiced as a certified public accountant for almost 40 years. He retired August 1, 2000, and he and his wife have spent a lot of time traveling the last four years. He informed the Committee that he currently has a CPA certificate, but he does not hold a permit to practice. He noted that the statutory requirement for his position on the Board is five years of practice as a CPA. He confirmed that he will be succeeding Dwight Keen. Further background information is shown on the summary prepared by the Office of the Governor. (Attachment 2)

Senator Haley commented that the Board's membership was recently reduced from five to three. He asked Mr. Paxson if he had an opportunity to gauge the three-member Board's overall case load. Mr. Paxson said the Mr. Keen gave him statistics concerning the number of cases and the current schedule of hearings. He went on to say that he is retired, and his very small legal practice is in the process of being shut down. Therefore, he will be available at all times, and he is willing to devote such time as necessary to the Board.

There being no further questions, Senator Corbin closed the confirmation hearings on Mr. Slack and Mr. Paxson. He noted that a vote on the confirmations could not be taken because there was not a quorum. Therefore, there will be a vote at the rail later in the day.

The meeting was adjourned at 11:55 a.m.

SENATE ASSESSMENT AND TAXATION COMMITTEE
GUEST LIST

DATE: April 1, 2004

NAME	REPRESENTING
DON R FAXSON	B. of Tax Appeals
Melissa Gregory	Governor's Office
John Wagner	KDOR
Bill Brady	Sprint
Mike McCreary	Sprint
Betty Johnson	Guest
Thom Shub	Bd of Tax Appeals
LINDA TERRILL	Meade Co MEADE COUNTY
MARK LOW	Meade Co
Tony Folsom	BOTA
Mark Wheeler	Guest
DWIGHT KEEN	BOTA
Nathy Damann	Pixius
Luke Thompson	Governor's Office
Jolynn Copp	Governor's Office
Jamie Andrews	
KEVIN WALKER	American Years Ass'n
Deann Williams	KMCA
Ken Peterson	KS Petroleum Council

Senate Confirmation Information Summary
Prepared and Submitted by the Office of Governor Kathleen Sebelius

Appointee: Thomas H. Slack

Position: Member, State Board of Tax Appeals

Appointment Date: March 23, 2004

Expiration Date: January 15, 2008

Term Length: 4 years

Statutory Authority: K.S.A. 74-2433 et seq.

Party Affiliation: Republican

⇒ Statutory geographic representation

Congressional District: Not more than one member shall be appointed from any one of the congressional districts

Requirements (*insert any that apply*)

County:

Size requirement (*if any*):

Other, specify: Members shall be residents of the state.

⇒ Statutory party affiliation requirement:

Not more than two members of the board shall be members of the same political party.

⇒ Statutory industry or occupation requirements:

One member shall have engaged in active practice as a certified public accountant for a period of at least five years. The members shall be selected with special reference to training and experience for duties and shall be individuals with legal, accounting or appraisal training and experience.

Salary: \$98,862.00

Predecessor: himself -- reappointed

Board Composition Prior to Confirmation of New Appointee:

(SEE ATTACHED LIST)

*Senate Assessment & Taxation
4-1-04
Attachment }*

State Board of Tax Appeals

1-2

GovAppts: 3

TotalAppts: 3

Statute: KSA 74-2433 et seq.

Party Ratio: 2:1

Confirmation: Y

** Committee Approved; Subject to Full Senate Confirmation

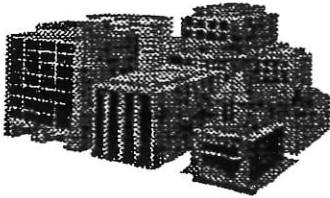
Term Length: Four Years

Notes: 1 member shall have been regularly admitted to practice law in KS and for period of 5 yrs. engaged in active practice of law, 1 member shall have engaged in active practice as a CPA for period of 5 yrs. Members shall be residents of KS. No more than 1 shall be appointed from

Contact: Tony Folsom
General Counsel & Executive Director
DSOB, Room 451, 915 SW Harrison
Topeka, KS 66612
785/296-2388
785/296-6690 fax

	<u>County</u>	<u>Affiliation</u>	<u>CD</u>	<u>H</u>	<u>S</u>	<u>Appointment Date</u>	<u>Expiration Date</u>
Keen Dwight D. 1 Tam-O-Shanter Court Winfield KS 67156 H: 620/221-6267 W: 785-296-2388 FAX:	Cowley	R	4	79	32	03/21/2000	01/15/2004
		Position: a member Seat #: 004 Succeeds: Robert Frey Appointed by: Governor Remarks: Fourth District Appointee; Attorney					
Patton David L. 1003 Central Dodge City KS 67801 H: 785-234-4681 W: 785-296-2388 FAX: 785-296-6690	Ford	D	1	55	19	01/16/2001	01/15/2005
		Position: a member and Chair Seat #: 001 Succeeds: himself -- reappointed Appointed by: Governor Remarks: First District Appointee; Attorney					
** Slack Tom H. 14113 Granada Shawnee Mission KS 66224 H: 913-851-7708 W: 913-385-9600 FAX: 913-385-9696	Johnson	R	3	28	11	08/05/2003	01/15/2004
		Position: a member Seat #: 005 Succeeds: Calvin T. Roberts Appointed by: Governor Remarks: Third District Appointee; member with appraisal experience					

Appraisal & Consulting Services Group



(h) 913-851-7708

Thomas H. Slack, MAI
8675 West 96th Street, Suite 203
Overland Park, Kansas 66212
Phone: (913) 385-9600
FAX: (913) 385-9696

THOMAS H. SLACK, MAI, J.D. Qualifications & Experience

Certifications

- I. State of Kansas Certified General Real Property Appraiser (G-250)
- II. State of Missouri Certified General Real Estate Appraiser (RA 001977)
- III. State of Iowa General Real Property Appraiser (CG01905)

Employment History

- 1996-Present President, Thomas H. Slack Appraisal Company, Inc.;
Principal, Appraisal & Consulting Services Group
- 1983-1996 Fee Appraiser, Nunnink & Associates, Inc., Kansas City
- 1981-1983 Vice President, Mid-America Mortgage Consultants, Ltd., Kansas City
- 1979-1981 Tax Accountant, Arthur Young & Company, Kansas City

Education

- I. University of Kansas, Bachelor of Science in Business Administration (1972-1976)
- II. University of Kansas, School of Law, Juris Doctorate (1976-1979)

Specialized Appraisal Related Experience

- I. Litigation Valuation - *Ad valorem* tax, bankruptcy, eminent domain, construction defects, environmental contamination, probate, divorce, impact studies and zoning.
- II. Local, Regional and National Scope Valuation Assignments, Market Valuation and Feasibility Analysis, Fee Simple, Lease by Lease and Fair Rental Analysis
 - A. **Retail** - Regional Malls, Community Centers, Outlet Malls, Power Centers, Neighborhood Centers, Discount Stores, Convenience Stores, Service Stations, Restaurants
 - B. **Industrial** - Manufacturing Plants, Distribution Centers, Industrial/Business Parks
 - C. **Residential** - Adult Congregate Care Facilities, Subdivision Analysis, Single Family, Nursing Homes
 - D. **Apartments** - High Rise, Mid-Rise, Garden, Retirement, HUD
 - E. **Office** - Regional and National Corporate Headquarters, Single and Multiple Tenant, Medical Offices
 - F. **Specialized Properties** - Hotels, Business Appraisals, Blight Studies, Tax Abatement Consultation, Impact Studies (Landfills, Convenience Stores, Retail, Cellular Monopoles, etc.), Golf Courses, Merchandise Marts, Hospitals

THOMAS H. SLACK, MAI, J.D.

Qualifications & Experience

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III. Expert Witness:

District/Circuit Courts: Jackson, Greene and Clay Counties in Missouri; Johnson County, Kansas; Linn and Delaware Counties in Iowa; Cook County, Illinois

Federal Bankruptcy Court: Kansas City, Missouri; Kansas City and Topeka, Kansas

Board of Tax Appeals for the State of Kansas

State Tax Commission for the State of Missouri

Affiliations**I. Appraisal**

- A. Member, The Appraisal Institute (MAI) No. 7785
- B. Kansas City Chapter No. 20 of The Appraisal Institute
- C. Affiliate, The Appraisal and Consulting Services Group
- D. Appraisal Institute Ethics and Counseling Panel Volunteer
- E. Director, Kansas City Chapter, American Institute of Real Estate Appraisers (1990-1991)
- F. Director, Kansas City Chapter, Appraisal Institute (1992-1993)
- G. Chairman, Professional Practice Committee, Kansas City Chapter, Appraisal Institute (2001)

II. Legal

- A. Admitted to Kansas Bar, 1979
- B. Admitted to Missouri Bar, 1980
- C. Member, Kansas City Bar Association

III. Accounting

Awarded Missouri CPA Certificate 1984

IV. Social and Other

- A. Chairman of the Board, Midwest Ear Institute (1993-1995)
- B. Director, Midwest Ear Institute (1993-1999)
- C. Director, United Cerebral Palsy Association of Kansas City (1989-1994)
- D. Kansas University Alumni Association and Williams Education Fund
- E. Sigma Alpha Epsilon Fraternity - Kansas Alpha
- F. Director, Midwest Bancorporation, Inc., Hays, Kansas (1988-1994)

(for Appointments Office use only)

KBI Check: NA In Process Complete

KANSAS GOVERNOR SEBELIUS APPOINTMENT QUESTIONNAIRE

Position for which you are applying: Board of Tax Appeals

Full Name (please include title and middle name): Thomas H. Slack

Home Address: 14113 Granada Leawood, KS 66224 Johnson
(City, State, Zip) (County)

Business Address: 8675 W. 96th Street, Suite 203 Overland Park, KS 66222
(City, State, Zip) Johnson (County)

Business Name: Thomas H. Slack Appraisal Co., Inc.

Position Title: President

Home Phone: (913) 851-7708 Business Phone: (913) 385-9600 Cell Phone: (913) 488-8022

Facsimile No: (913) 385-9696 E-Mail Address: tslack@appraisalcentral.com

Driver's License No: _____ Social Security No: _____

Date of Birth: 4/21/54 Place of Birth: Newton, KS Kansas resident? yes

Registered Voter? yes Party Affiliation: Republican

Congressional District: 3 Kansas Senate District: 11 Kansas Representative District: 28

Do you have the legal right to live and work in the United States?
yes

Education: BS, Business Administration, University of Kansas
J.D., Law, University of Kansas

Employment Experience: owner, T.H. Slack Appraisal Co. 1996-present;

Nannink & Associates 1983-1996; Mid-America Mortgage Consultants 1981-1987; Arthur Young & Co. 1979-1981

Do you hold any professional licenses? If so, please provide numbers: KS Bar 10378; Mo Bar 30904
Mo CPA; KS Appraiser G-250; Mo Appraiser RA197

What special skills could you bring to this position? Iowa Appraiser CG01905

CPA - accounting (business appraisals) valuation; legal; MAT - real estate valuation

Previous government appointments: _____
(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: *None*
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: *None*
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:
5. **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 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 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 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 Yes _____
10. **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 _____ Yes *See attached*
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. *See attached*

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
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
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 state. None
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. N/A
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 of 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 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. 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. See Attached

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 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 Yes _____
22. **U.S. Military convictions.** Have you ever been convicted by any military court? If yes, please provide details. No Yes _____
23. **Imprisonment.** Have you ever been imprisoned, been on probation, or been on parole? If yes, please provide details. No 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 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 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? ^{Yes}
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 Yes _____
27. **Drivers license.** Has your drivers license ever been suspended or revoked? If yes, please describe. No 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 Yes _____
29. **Security clearance denial.** Have you ever been denied a military or other governmental clearance? If yes, please explain. No Yes _____

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 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 Yes _____
32. **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. **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.

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

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 _____

REFERENCES/SIGNIFICANT SUPPORTERS (elected officials, community leaders, friends, etc.)

Name: Linda Terrill Relationship to you: business associate; friend

Telephone: (913) 814-8900

Name: Ben Neill Relationship to you: business associate; friend

Telephone: (913) 814-8900

Name: Larry Winn III Relationship to you: business associate; community leader

Telephone: (913) 451-8788

Name: _____ Relationship to you: _____

Telephone: _____

AUTHORIZATION AND CERTIFICATION:

The facts set forth in my application are true and complete. False statements, answers, or omissions on this application shall be sufficient cause for nonconsideration or for dismissal after appointment or employment. I also recognize that my selection is based on receipt of satisfactory information from former employers and references, and upon my ability to perform the essential elements, with or without reasonable accommodations, for the position for which I am applying. I herein authorize investigation, without liability, of the information supplied by me in this application for employment or appointment including academic, occupational, health, law enforcement, and government records. I also authorize listed employers and references, without liability, to make full response to any inquiries in connection with this application for appointment or employment. I understand and agree that the terms, conditions, compensation, benefits, hours, schedule, and duration of my appointment or employment may be determined, changed, or modified from time to time at the will of the appointing authority or designee without limitation or condition. I FURTHER CERTIFY THAT I HAVE READ THE FOREGOING PARAGRAPH AND KNOWINGLY MAKE THIS AUTHORIZATION BY SETTING FORTH MY SIGNATURE.

I understand that if I am required to be registered, licensed, or certified by federal or state law or regulation for the position I seek, I will notify the appointing authority immediately if any investigation, limitation, or cancellation of my registration, licensure, or certification occurs. If any investigation, probation, limitation, or cancellation occurs, I understand that my failure to notify my appointing authority as described above will result in the termination of my appointment or employment.

Signature  Date 8/19/03

Please attach a copy of your resume if you have not previously provided one to the Appointments office.

KANSAS GOVERNOR SEBELIUS APPOINTMENT QUESTIONNAIRE

Attachment To Questionnaire

Question 9 – Associations:

I believe the person with whom I have had a business association that would be most likely to attempt to impugn or attack my character and qualifications would be Paul Welcome, County Appraiser for Johnson County. In the past, Mr. Welcome has assisted a county assessor in another state in attempting to unfairly impugn my character and qualifications in order to gain an advantage in a property tax appeal. When I aggressively defended my integrity, they eventually backed down from the attack. Nevertheless, I would presume there would be some opposition from the Johnson County Appraiser's office.

Question 11 – Special Skills/Qualifications:

I believe my 20 years of experience as a real estate and business appraiser, including 15 years as an MAI, indicate my extensive experience and qualifications relating to property tax appeals. In addition, I obtained my CPA certificate 19 years ago in Missouri and am a licensed CPA in Missouri today. I spent two years with a public accounting firm and have experience with preparing allocations of income among various states for corporations doing business in multiple states. Finally, as an attorney, I am trained in interpreting statutes.

Question 19 – Other Activities That Could Conflict With Duties:

I have been retained to prepare appraisals of several properties for property tax purposes over the past two years that have not yet been resolved at the county level. If those appeals were to reach the Board of Tax Appeals, I would clearly have to recuse myself from those cases and I would be asked to testify on behalf of the party for whom I appraised the property. Other than in those few cases, however, I would not anticipate any conflicts and, in each of those cases, I prepared only an appraisal consistent with my independent judgment of market value. I was not an advocate for a party.

Question 26 – Other Litigation:

To my knowledge, I have been a party to two civil lawsuits. In 1996, I was a plaintiff in a suit against my former employer, Nunnink & Associates, Inc. I sued the company for violation of an employment agreement and I left the company in conjunction with that litigation. The case was settled when my former employer agreed to pay me in return for my agreement not to disclose the amount of the payment.

In 1975, I was a defendant in a personal injury claim from an automobile accident. I was not cited for any violations, but was sued by the family of a little boy who was injured. My insurance company handled the case and settled the matter. I was never informed of any of the terms.



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

<u>Slack</u>	<u>Thomas</u>	<u>H</u>
Last Name	First Name	MI
<u>Jeannie</u>		
Spouse's Name		
<u>14113 Granada</u>		
Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number		
<u>Leawood, KS 66224</u>		
City, State, Zip Code		
<u>(913) 851-7708</u>	<u>(913) 385-9600</u>	
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.

Board of Tax Appeals

List Name of Agency, Board, University or Elected Position (You may use abbreviations but not acronyms)

<u>Member</u>
Position

Division if applicable (May use acronyms)

* 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.

*

3	7	4	2
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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	HELD BY WHOM
1.	T.H. Slack Appraisal Co., Inc. Overland Park, KS	Appraisal Co.	stock	100%	self
2.	Bartels Family Limited Partnership No. 2, Hays, KS	family investment partnership	life beneficiary		spouse
3.	Bartels Family Limited Partnership No. 5, Hays, KS	family investment partnership	life beneficiary		spouse
4.	National Advisors Trust Overland Park, KS	retirement fund	IRA acct.		self
5.	National Advisors Trust Overland Park, KS	retirement fund	SEP acct		self
6.					
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 ____.

	NAME OF PERSON OR BUSINESS FROM WHOM GIFT RECEIVED	ADDRESS	RECEIVED BY:
1.	Jim and Pat Bartels	Hays, KS	self
2.	Jim and Pat Bartels	Hays, KS	spouse
3.			

E. **RECEIPT OF COMPENSATION:** 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 ____.

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.	T. H. Slack Appraisal Co., Inc	Overland Park, KS	appraisal
2.			

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 X.

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.			
2.			

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
1.	Thomas H. Slack Appraisal Co., Inc. Overland Park, KS	President	Self
2.	Thomas H. Slack Appraisal Co., Inc. Overland Park, KS	Secretary	Spouse
3.			
4.			
5.			
6.			
7.			
8.			

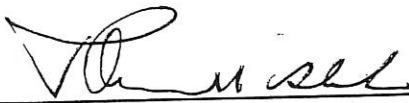
G. **RECEIPT OF FEES AND COMMISSIONS:** List each client or customer who pays fees or commissions to a business or combination of businesses from which fees or commissions you or your spouse received an aggregate of \$2,000 or more in the preceding calendar year. The phrase "client or customer" relates only to 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	RECEIVED BY
1.			
2.	See attached		
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			

H. **DECLARATION:**

I, Thomas H. Slack, 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.

8/13/03
 Date


 Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES 1

Return your completed statement to the Secretary of State, Memorial Hall, First Floor, 120 SW 10th Ave., Topeka, Kansas 66612-1594.

KANSAS GOVERNMENTAL ETHICS AND COMMISSION
PART G. RECEIPT OF FEES AND COMMISSIONS

	Name of Client/Customer	Address	Received By
1	Haith Air Cargo	Overland Park, KS	T.H. Slack Appraisal
2	General Electric	Ft. Myers, FL	T.H. Slack Appraisal
3	Best Buy	Minneapolis, MN	T.H. Slack Appraisal
4	Engineered Air	DeSoto, KS	T.H. Slack Appraisal
5	Airport Building Associates	Overland Park, KS	T.H. Slack Appraisal
6	Gold Bank	Kansas City, MO	T.H. Slack Appraisal
7	Day Star Corporation	North Kansas City, MO	T.H. Slack Appraisal
8	Young Corporation	Bucyrus, KS	T.H. Slack Appraisal
9	Amini's Galleria	Overland Park, KS	T.H. Slack Appraisal
10	Hillcrest Bank	Overland Park, KS	T.H. Slack Appraisal
11	Sunny Hills Apartments, LLC	Shawnee Mission, KS	T.H. Slack Appraisal
12	Wal*Mart	Bentonville, AR	T.H. Slack Appraisal
13	Executive Hills, Inc.	Overland Park, KS	T.H. Slack Appraisal
14	B&B Management	Fresno, CA	T.H. Slack Appraisal
15	The Mission Bank	Mission, KS	T.H. Slack Appraisal
16	Key Bank	Cleveland, OH	T.H. Slack Appraisal
17	Galyan's Trading Co.	Plainfield, IN	T.H. Slack Appraisal
18	Jay Greitlein	West Des Moines, IA	T.H. Slack Appraisal
19	Executive Manor, Inc.	Topeka, KS	T.H. Slack Appraisal
20	Bank of Blue Valley	Overland Park, KS	T.H. Slack Appraisal
21	Valley View Bank	Overland Park, KS	T.H. Slack Appraisal
22	Commerce Bank	Kansas City, MO	T.H. Slack Appraisal
23	Homestead Country Club	Prairie Village, KS	T.H. Slack Appraisal
24	Joseph C. Sansone Company	St. Louis, MO	T.H. Slack Appraisal
25	Kansas City Georgetown Apartments	Merriam, KS	T.H. Slack Appraisal
26	Maxus Properties	Greenville, SC	T.H. Slack Appraisal
27	John's Food & Drink	Kansas City, MO	T.H. Slack Appraisal
28	Northgate Village Apartments	Shawnee Mission, KS	T.H. Slack Appraisal

Senate Confirmation Information Summary
Prepared and Submitted by the Office of Governor Kathleen Sebelius

Appointee: Don R. Paxson

Position: Member, State Board of Tax Appeals

Appointment Date: March 23, 2004

Expiration Date: January 15, 2008

Term Length: 4 years

Statutory Authority: K.S.A. 74-2433 et seq.

Party Affiliation: Democrat

⇒ Statutory geographic representation
Requirements (*insert any that apply*)

Congressional District: Not more than one member shall be appointed from any one of the congressional districts

County:

Size requirement (*if any*):

Other, specify: Members shall be residents of the state.

⇒ Statutory party affiliation requirement:

Not more than two members of the board shall be members of the same political party.

⇒ Statutory industry or occupation requirements:

One member shall have engaged in active practice as a certified public accountant for a period of at least five years. The members shall be selected with special reference to training and experience for duties and shall be individuals with legal, accounting or appraisal training and experience.

Salary: \$98,862.00

Predecessor: Dwight D. Keen

Board Composition Prior to Confirmation of New Appointee:

(SEE ATTACHED LIST)

*Senate Assessment & Taxation
4-1-04
Attachment 2*

State Board of Tax Appeals

2-2

GovAppts: 3

Term Length: Four Years

Contact: Tony Folsom
General Counsel & Executive Director
DSOB, Room 451, 915 SW Harrison
Topeka, KS 66612
785/296-2388
785/296-6690 fax

TotalAppts: 3

Notes: 1 member shall have been regularly admitted to practice law in KS and for period of 5 yrs. engaged in active practice of law, 1 member shall have engaged in active practice as a CPA for period of 5 yrs. Members shall be residents of KS. No more than 1 shall be appointed from each county.

Statute: KSA 74-2433 et seq.

Party Ratio: 2:1

Confirmation: Y

** Committee Approved; Subject to Full Senate Confirmation

	<u>County</u>	<u>Affiliation</u>	<u>CD</u>	<u>H</u>	<u>S</u>	<u>Appointment Date</u>	<u>Expiration Date</u>
Keen Dwight D. 1 Tam-O-Shanter Court Winfield KS 67156 H: 620/221-6267 W: 785-296-2388 FAX:	Cowley	R	4	79	32	03/21/2000	01/15/2004
		Position: a member Seat #: 004 Succeeds: Robert Frey Appointed by: Governor Remarks: Fourth District Appointee; Attorney					
Patton David L. 1003 Central Dodge City KS 67801 H: 785-234-4681 W: 785-296-2388 FAX: 785-296-6690	Ford	D	1	55	19	01/16/2001	01/15/2005
		Position: a member and Chair Seat #: 001 Succeeds: himself -- reappointed Appointed by: Governor Remarks: First District Appointee; Attorney					
** Slack Tom H. 14113 Granada Shawnee Mission KS 66224 H: 913-851-7708 W: 913-385-9600 FAX: 913-385-9696	Johnson	R	3	28	11	08/05/2003	01/15/2004
		Position: a member Seat #: 005 Succeeds: Calvin T. Roberts Appointed by: Governor Remarks: Third District Appointee; member with appraisal experience					

DON R. PAXSON, CPA, JD

History

Born in Topeka, Kansas, November 7, 1935. Graduated from Topeka High School 1953. Married Betty Barnes of Warrensburg, Missouri on December 20, 1958. Son Brian D. Paxson lives and works in Topeka.

Summary of Professional Experience

Tax member of Wendling Noe Nelson & Johnson LLC from January 1, 1988 until retirement on August 1, 2000. Primary responsibilities included research, litigation, tax examinations, tax exemption applications, qualified plans, employee benefits and tax consultation in planning and structuring transactions. Other duties included supervision of all types of tax compliance matters with emphasis on corporations, tax-exempt entities, insurance and financial organizations, investment partnerships, estates and trusts.

Experience Prior to 1988

Partner and Partner-in-Charge, Paxson and Richel CPA, Topeka, Kansas, 1965 to 1977. Partner-in-Charge. Touche Ross & Co., Topeka, Kansas, 1977 to 1979. Tax Manager, Arthur Andersen & Co., Seattle, Washington. 1979 to 1981. Vice-President Finance, The Columbian Securities Corporation, Topeka, Kansas, 1981 to 1985. Sole Practitioner, Topeka, Kansas. 1985 to 1987. Chairman of the Board of Directors, Fairlawn Plazabank, Topeka, Kansas. 1985 to 1988. Staff accountant, Paxson and Richel CPA's Topeka, Kansas August 1957 to 1965. Accounting intern, Touche, Ross & Co., Chicago, Illinois 1957. Kansas National Guard 1955 to 1957.

Education

J.D., University of Kansas, School of Law. 1970

B.S. in Business, University of Kansas, School of Business, 1957

Admitted to the Bar of the Supreme Court of the United States

Admitted to the Bar of the Supreme Court of the State of Kansas

Admitted to the Bar of the Tax Court of the United States

Admitted to the Bar of the United States District Court for the District of Kansas

Certified Public Accountant, Kansas and Missouri (Not in active practice). Former holder of Certificates in various other States including, Washington, Florida, and Iowa. Former Financial and Operations Principal, National Association of Securities Dealers

Former Chairman and Member Kansas State Board of Accountancy

Former Commissioner, Kansas Public Disclosure Commission

Former Member, Pooled Money Investment Board, State of Kansas

Treasurer of various political campaigns including, Dr. Bill Roy for Congress and United States Senate, John Carlin for Governor and others.

Formerly Member of the Board and Treasurer for Doorstep and Shawnee County Mental Health Association.

Member of Rotary and Saturday Night Literary Club of Topeka

Speaker at various conferences on matters of taxation, insurance regulation and political reporting rules.

(for Appointments Office use only)

KBI Check: NA In Process Complete

KANSAS GOVERNOR SEBELIUS APPOINTMENT QUESTIONNAIRE

Position for which you are applying: STATE BOARD OF TAX APPEALS

Full Name (please include title and middle name): DONALD ROSS PAXSON

Home Address: 2255 SW WESTRIDGE DRIVE, TOPEKA, KS 66614 SHAWNEE
(City, State, Zip) (County)

Business Address: 2255 SW WESTRIDGE DRIVE, TOPEKA, KS 66614 SHAWNEE
(City, State, Zip) (County)

Business Name: DON R. PAXSON, ATTORNEY-AT-LAW

Position Title: ATTORNEY

Home Phone: 785-273-7118 Business Phone: 785-273-7118 Cell Phone: 785-633-2821

Facsimile No: 785-273-7118 E-Mail Address: dpaxson@cox.net

Driver's License No: _____ Social Security No: _____

Date of Birth: 11/7/1935 Place of Birth: TOPEKA, KS Kansas resident? YES

Registered Voter? YES Party Affiliation: DEMOCRATIC

Congressional District: 2ND Kansas Senate District: 20 Kansas Representative District: 51

Do you have the legal right to live and work in the United States? YES - CITIZEN BY BIRTH

Education: TOPEKA PUBLIC SCHOOL, THS 1953, UNIVERSITY OF KANSAS, B.S. 1957

Employment Experience: ATTORNEY, 2000-2004; CPA 1959 - 1986 AND 1987- 2000;

SECURITIES INDUSTRY 1981 - 1986

Do you hold any professional licenses? If so, please provide numbers: LAW: 7107

What special skills could you bring to this position? BACKGROUND IN BUSINESS AND LAW

Previous government appointments: POOLED MONEY BOARD 1993 - 1997; STATE BOARD OF
(Please provide dates)

ACCOUNTANCY, 1973 - 1976; 1991-1996; GOVERNMENTAL ETHICS/PUBLIC DISCLOSURE

1977-1978; 1981-1989

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: PRIVATE; 8/8/1957
HONORABLE
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: SEE ATTACHED
3. **Elective Public Office:** List on a separate sheet all elective public offices sought and/or held with dates of service: NONE
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: SEE ATTACHED
5. **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. SEE ATTACHED
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 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 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 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 Yes _____
10. **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 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.)

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 XX 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 XX 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 state. NONE _____
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 XX 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. NONE _____
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 of 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 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. 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 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 Yes
22. **U.S. Military convictions.** Have you ever been convicted by any military court? If yes, please provide details. No Yes
23. **Imprisonment.** Have you ever been imprisoned, been on probation, or been on parole? If yes, please provide details. No 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 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 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 Yes - SEE ATTACHED
27. **Drivers license.** Has your drivers license ever been suspended or revoked? If yes, please describe. No 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 Yes
29. **Security clearance denial.** Have you ever been denied a military or other governmental clearance? If yes, please explain. No Yes

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 XX 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 XX Yes _____
32. **Consumption of alcohol.** Are you currently abusing alcohol? No XX 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 XX 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 XX
35. **Other.** Please provide any additional information, favorable or unfavorable, which you feel should be considered in connection with your appointment.

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

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 XX Yes _____

SEE ATTACHED

REFERENCES/SIGNIFICANT SUPPORTERS (elected officials, community leaders, friends, etc.)

Name: WILLIAM R. ROY Relationship to you: FRIEND

Telephone: 785-273-6304

Name: DR. GLENN SWOGGER, JR. Relationship to you: FRIEND

Telephone: 785-272-1939

Name: MARK C. WHEELER Relationship to you: FRIEND

Telephone: 785-271-1000

Name: THOMAS HANEY Relationship to you: FRIEND

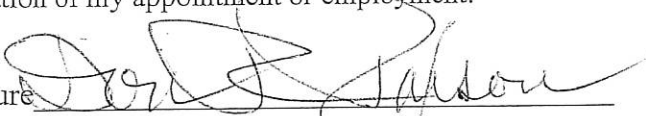
Telephone: 785-232-2200

AUTHORIZATION AND CERTIFICATION:

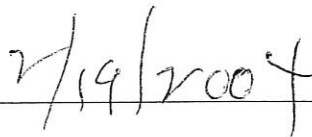
The facts set forth in my application are true and complete. False statements, answers, or omissions on this application shall be sufficient cause for nonconsideration or for dismissal after appointment or employment. I also recognize that my selection is based on receipt of satisfactory information from former employers and references, and upon my ability to perform the essential elements, with or without reasonable accommodations, for the position for which I am applying. I herein authorize investigation, without liability, of the information supplied by me in this application for employment or appointment including academic, occupational, health, law enforcement, and government records. I also authorize listed employers and references, without liability, to make full response to any inquiries in connection with this application for appointment or employment. I understand and agree that the terms, conditions, compensation, benefits, hours, schedule, and duration of my appointment or employment may be determined, changed, or modified from time to time at the will of the appointing authority or designee without limitation or condition. I FURTHER CERTIFY THAT I HAVE READ THE FOREGOING PARAGRAPH AND KNOWINGLY MAKE THIS AUTHORIZATION BY SETTING FORTH MY SIGNATURE.

I understand that if I am required to be registered, licensed, or certified by federal or state law or regulation for the position I seek, I will notify the appointing authority immediately if any investigation, limitation, or cancellation of my registration, licensure, or certification occurs. If any investigation, probation, limitation, or cancellation occurs, I understand that my failure to notify my appointing authority as described above will result in the termination of my appointment or employment.

Signature



Date



Please attach a copy of your resume if you have not previously provided one to the Appointments office.

Attached to and made a part of:
Kansas Governor Sebelius Appointment Questionnaire

2. Governmental Experience:

In addition to the items listed on page 1 of the Questionnaire, I have served as follows:

Kansas Commission for the 125th. Served on the Governor's Commission and as Secretary and Board Member of Kansas Commission for the 125th, Inc., a not-for-profit, IRS 501(c)(3) organization. August 1985 through 1986

Securities Commissioner's Advisory Committee. Served as a member since about 1990 to the current time.

Shawnee County Mental Health Corporation. Served as a member and perhaps Treasurer sometime in the late 1970's or early 1980's.

Senate Banking Committee. Served on an advisory team from the University of Kansas Law School concerning the adoption of the Uniform Consumer Credit Code in Kansas. About 1969.

Court Appointed Receiver in the Culture Farms Case about 1985

Court Appointed Receiver in the Columbian Energy Company Entities Case from 1991 to 2004.

4. Honors and Awards.

Member Beta Gamma Sigma, Business School Honor Society

Member Order of the Coif, Law School Honor Society

Passed Uniform CPA Examination on the first attempt.

5. Organization Affiliations

Kansas Society of Certified Public Accountants. Board of Directors and Chairman of the Tax Conference Committee (twice). 1970's and 1980's

Mental Health Association of Shawnee County. Member of Board and I believe Treasurer. Late 1960's or early 1970's

Doorstep, Inc. Member of the Board and Treasurer. Early 1960's

Saturday Night Literary Club of Topeka, Kansas. President about 2002.

Papers include: The Coffeepot that Sailed Around the World - USS Kansas and the Great White Fleet. Majors! - Alexander Majors and the Santa Fe Trail

26. Other litigation.

I was a defendant in a small claims action concerning a dispute about a tree trimming charge. I had forgotten about it entirely until it turned up in the KBI in the background check for my appointment to the Pooled Money Management Board in 1993.

36. Delinquencies

I am not delinquent on any federal, state, or local debt. In 2000 I received a notice from the State of Kansas about a balance due for 1993. I engaged an attorney and received the accompanying letter which states that the account for 1993 is now at a zero balance.

LAW OFFICES OF

GOODELL, STRATTON, EDMONDS & PALMER, L.L.P.

515 SOUTH KANSAS AVENUE

TOPEKA, KANSAS 66603-3999

785-233-0593

TELECOPIER: 785-233-8870

E-MAIL: GSEP@CJNETWORKS.COM

GERALD L. GOODELL
WAYNE T. STRATTON
ARTHUR E. PALMER
H. PHILIP ELWOOD
HAROLD S. YOUNGTOB*
GERALD J. LETOURNEAU
CHARLES R. HAY
PATRICK M. SALSBURY
JOHN H. STAUFFER, JR.
LES E. DIEHL
N. LARRY BORK**
STEVE A. SCHWARM
ANNE M. KINDLING
SCOTT C. PALECKI***

LAURA B. LAWSON
CAROL R. BONEBRAKE

SPECIAL COUNSEL
JOSEPH E. MCKINNEY
MARTA FISHER LINENBERGER
CURTIS J. WAUGH

OF COUNSEL
ROBERT E. EDMONDS, RETIRED
ROBERT A. McCLURE, RETIRED
JOHN A. BAUSCH

DECEASED
JOHN D. ENSLEY (1958-1999)
RICHARD W. HOLMES (1923-1999)

June 13, 2000

*ADMITTED IN KANSAS, MISSOURI AND NEW YORK

**ADMITTED IN KANSAS AND NEBRASKA

***ADMITTED IN KANSAS AND MISSOURI

Mr. Donald Paxson
2255 Westridge Dr.
Topeka, KS 66614

PERSONAL AND PRIVILEGED

Dear Don:

Enclosed find the promised letter from the State of Kansas indicating that no balance due exists for 1993.

I believe this closes the matter. If, however, you have any question, please call.

Very truly yours,



Joseph E. McKinney

JEM:dt
Enc.

18412

2-13



Kansas Department of Revenue
915 SW Harrison Street
Topeka, Kansas 66625-0001

Collections Phone: (800) 815-3563
Collections Fax: (785) 291-3616
Hearing Impaired TTY: (785) 296-6117

Compliance Management - Collections

June 6, 2000

JOE MCKINNEY
GOODELL, STRATTON
EDMONDS & PALMER
515 SW KANSAS AVE
TOPEKA KS 66603-3999

Reference Number:	_____
Identification Number:	_____
PFS Number:	_____
Tax Type:	Individual Income
Tax Period/Year Ending:	_____
Credit or Refund Amt:	_____
Tax:	_____
Interest:	_____
Penalty:	_____
Estimate Tax Penalty:	_____
Total Amount Due:	\$0.00

See the item(s) checked below for the status of your account.

- Your request has been approved. Penalty in the amount shown above has been waived.
- The previously paid penalty has been waived and you now have a credit in the amount shown above. This credit may be applied to future tax liabilities on this account for this tax type only.
- The previously paid penalty has been waived and will be refunded. Please allow six to eight weeks for your refund to be processed.
- Your request for waiver of penalty will be reviewed upon receipt of payment for the tax and interest due as shown above. The tax and interest must be paid within 10 days or your request will be disapproved and your account will be referred to the Collections Division. Enclose a copy of this letter with your payment.
- Your request for waiver of penalty has been denied.
- Your request for the waiver or reduction of underpayment of estimated tax penalty has been denied. The total amount due as shown above must be paid within 10 days to avoid collection referral. Enclose a copy of this letter with your payment.
- Your request for the reduction of interest has been denied. The total amount due must be paid within 10 days to avoid collection referral. Enclose a copy of this letter with your payment.
- Additional comments:

Sir, as we discussed the 1993 taxyear on Mr Don Paxson, his account for 1993 is now
at zero balance.

This notice shall constitute a final determination by the Director of Taxation. If you feel aggrieved by this determination you may appeal to the Kansas Board of Tax Appeals, 915 SW Harrison St., Room 451, Docking State Office Building, Topeka, Kansas 66612-1505, within thirty (30) days.

If you have questions regarding this matter please contact me at the telephone number shown below.

Auditor/Examiner: Humberto Ramos

Telep 785-296-6119



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

PAXSON	DONALD	ROSS
Last Name	First Name	MI

PAXSON, BETTY
Spouse's Name

2255 SW WESTRIDGE DRIVE

Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number

TOPEKA, KS 66614

City, State, Zip Code

785-273-7118

Home Phone Number (include area code)

785-273-7118

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.

STATE BOARD OF TAX APPEALS

List Name of Agency, Board, University or Elected Position (You may use abbreviations but not acronyms)

Division if applicable (May use acronyms)

MEMBER

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.

*

2	4	9	3
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Rev. 2/2001

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 H.H.I.D	PERCENT OF OWNERSHIP INTERESTS	HELD BY WHOM
1. WENDLING NOE NELSON & JOHNSON	CPA'S	RETIREMENT	NONE	SELF
2. FIDELITY MAGELLAN MUTUAL FUND	MUTUAL FUND	IRA	>1%	SELF
3. JANUS OLYMPUS FUND	MUTUAL FUND	IRA	>1%	SELF
4. OFFICE CONDO 5875 SW 29TH STREET, TOPEKA	RENTAL PROPERTY	TEE SIMPLE	100%	JOINT
5. GENERAL ELECTRIC NEW YORK, NY	MEDIA, MANUF.	COM. STOCK	1%	WIFE
6. INTEL CORP.	CHIP MANUF.	COM. STOCK	>1%	WIFE
7. CITIGROUP NEW YORK, NY	BANK	COM STOCK	>1%	WIFE
8. MICROSOFT SEATTLE, WA	SOFTWARE	COM. STOCK	>1%	WIFE
9. H. & R. BLOCK, INC. KANSAS CITY, MO	TAX PREP/INVEST	COM. STOCK	1%	SELF
10. IBM NEW YORK, NY	COMPUTERS	COM. STOCK	1%	SELF

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 XX.

NAME OF PERSON OR BUSINESS FROM WHOM GIFT RECEIVED	ADDRESS	RECEIVED BY:
1.		
2.		
3.		

B. RECEIPT OF COMPENSATION: 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 ____.

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.	DON R. PAXSON, ATTORNEY	2255 SW WESTRIDGE, DR	ATTORNEY
2.			

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 XX.

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.			
2.			

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 XX.

	BUSINESS NAME AND ADDRESS	POSITION HELD	HELD BY WHOM
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

G. RECEIPT OF FEES AND COMMISSIONS: List each client or customer who pays fees 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 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 _____.

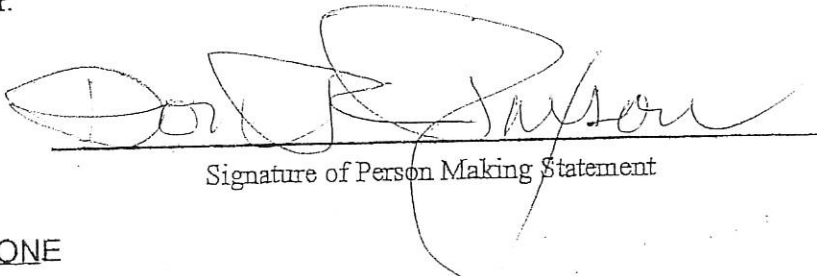
	NAME OF CLIENT / CUSTOMER	ADDRESS	RECEIVED BY
1.	BERLIN-WHEELER, INC.	2942-A WANNAMAKER DR TOPEKA, KS 66614	SELF
2.			
3.	INNOVATIVE SERVICES, LLC	2942-A WANNAMAKER DR TOPEKA, KS 66614	SELF
4.			
5.	PARRISH MANAGEMENT CORP.	700 JACKSON, SUITE 200 TOPEKA, KS 66603	SELF
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			

H. DECLARATION:

I, DON R. PAXSON, 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.

FEBRUARY 18, 2004

Date


Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES NONE

Return your completed statement to the Secretary of State, Memorial Hall, First Floor, 120 SW 10th Ave., Topeka, Kansas 66612-1594.