

Approved: 4-29-06  
Date

MINUTES OF THE SENATE FEDERAL AND STATE AFFAIRS COMMITTEE

The meeting was called to order by Chairman Pete Brungardt at 10:45 a.m. on April 27, 2006 at the rail on the third floor of the Capitol.

All members were present except:

Senator Karin Brownlee- excused  
Senator Anthony Hensley- excused  
Senator John Vratil- excused  
Senator Dennis Wilson- excused

Committee staff present:

Dennis Hodgins, Kansas Legislative Research Department  
Connie Burns, Committee Secretary

Others attending:

Chairman Brungardt opened the confirmation hearing on the reappoint of Jeanine McKenna, member to the Kansas Lottery Commission. Information was provided to the committee prior to the meeting. (Attachment 1)

Senator O'Connor made a motion to move to the full Senate the confirmation of Jeanine McKenna to be a member to the Kansas Lottery Commission. Senator Reitz seconded the motion. The motion carried.

The meeting was adjourned at 10:55 am.

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

**Appointee:** Jeanine McKenna

**Position:** Member, Kansas Lottery Commission

**Appointment Date:** April 20, 2006

**Expiration Date:** March 15, 2010

**Term Length:** 4 years

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**Statutory Authority:** K.S.A. 74-8709

**Party Affiliation:** Republican

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

Congressional District:

County:

Size requirement (*if any*):

Other, specify: All members shall be citizens of the United States and residents of this state.

⇒ Statutory party affiliation requirement:

Not more than three of the five members shall be members of the same political party.

⇒ Statutory industry or occupation requirements:

**Salary:**

**Predecessor:** herself -- reappointed

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**Board Composition Prior to Confirmation of New Appointee:**

*See Attached List*

Sen Fed & State Affairs

Attachment 1  
4-27-06

# Kansas Lottery Commission

Gov Appts: 5

Term Length: Four Years

Contact: Mary Metzler

Total Appts: 5

Notes: US citizen, Kansas resident. Gov appoints all 5: all at-large public members. Governor designates a chair. Conflict of interest statute: 74-8716.

128 N. Kansas Avenue  
Topeka, KS 66603  
785/296-5700

Statute: KSA 74-8709

Confirmation:

Gov Appt Counts Male/Female

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

R / D / U

Board Active

Party Ratio: 3:2

3 : 2

2 : 1 : 1 : 1

2 : 3 : 0

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

	County	Affiliation	CD	H	S	Appointment Date	Expiration Date	Reapt
Franklin-Breitenbach, Ms. Joni J. 329 S. Glendale Wichita, KS 67218 Work (316) 264-5664 Home 316-683-5813 Fax (316) 264-2016 Cell 316-258-9184 joni@jfranklinlaw.com	Sedgwick	D	4	83h	30s	11/9/2004	3/15/2007	<input checked="" type="checkbox"/>
		Position: a member Succeeds: Craig Robinson Appointed By: Governor Nominations: Statutory Remarks: At-Large Member Seat #: 004						
Gayoso, Jr., Mr. Michael 706 W. 8th St. Girard, KS 66743 Work 620-724-8239 Home 620-232-6229 Fax 620-724-6105 Cell 620-230-9616 mgayoso@cpol.net	Crawford	R	2	3h	13s	4/28/2004	3/15/2007	<input checked="" type="checkbox"/>
		Position: a member Succeeds: James W. Cates Appointed By: Governor Nominations: Statutory Remarks: At-Large Member Seat #: 001						
McKenna, Ms. Jeanine 2667 Road V Reading, KS 66868 Work 620/342-1600 Home 620/699-3312 Fax 620/342-3223 Cell 620/343-0796 jmckenna@emporiakschamber.org	Lyon	R	1	76h	17s	12/4/2002	3/15/2006	<input checked="" type="checkbox"/>
		Position: a member Succeeds: Paul Steele Appointed By: Governor Nominations: Statutory Remarks: At-Large Member Seat #: 005						

1-3

	<u>County</u>	<u>Affiliation</u>	<u>CD</u>	<u>H</u>	<u>S</u>	<u>Appointment Date</u>	<u>Expiration Date</u>	<u>Reapt</u>
Nye, Mr. Harold J. 3503 Chaumont Hays, KS 67601 Home (785) 628-1301 hnye@grapevine.net		D	1	11h	36s	10/18/2005	3/15/2009	<input checked="" type="checkbox"/>

**Position:** a member  
**Succeeds:** William J. Falstad  
**Appointed By:** Governor  
**Nominations:**  
**Statutory Remarks:** At-Large Member

**Seat #:** 002

Van Cleave, Mr. Robert B. 13327 W. 113th Street Overland Park, KS 66210 Work 913-661-0222 Home 913-451-0443 Fax 913-491-6398 rbvopks@netscape.net	Johnson	D	3	16h	37s	1/6/2006	3/15/2008	<input checked="" type="checkbox"/>
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**Position:** a member  
**Succeeds:** Carole Gates, who resigned  
**Appointed By:** Governor  
**Nominations:**  
**Statutory Remarks:** At-Large Member

**Seat #:** 004

**Jeanine McKenna**

2667 Road V  
Reading, KS 66868

Telephone HM (620)699-3312  
WK. (620)342-1600

E-mail: [jmckenna@emporiakchamber.org](mailto:jmckenna@emporiakchamber.org)

EDUCATION: Fort Hays State University  
1989  
Bachelor of Arts  
Communications with an emphasis in Public Relations

EXPERIENCE: President/CEO  
August 2000 – Present  
Emporia Area Chamber of Commerce and Convention & Visitors Bureau,  
Emporia, Kansas  
Responsibilities include: Plan, organize and direct operations of the Chamber  
and Convention & Visitors Bureau in such a way as to insure the necessary  
investment in terms of manpower and money, to enable the Chamber and CVB  
to carry out its function in the fields of industrial, commercial, and civic  
development and legislative action. Develop and administer annual budgets  
totaling more than \$600,000.  
Additional accomplishments and abilities include:  
❖ Outstanding public speaking ability.  
❖ Excellent fiscal and budgetary understanding.  
❖ Creative in my ways of marketing projects and programs of the Chamber  
and CVB.  
❖ Lead Chamber through new Total Resource Campaign.  
❖ Lead businesses through major downtown reconstruction.  
❖ Lead many communities and Chambers through facilitation of planning  
retreats and community development projects.

President/CEO  
May 1993 – July 2000  
New Ulm Area Chamber of Commerce; New Ulm, Minnesota  
Responsibilities include: Overall management of Chamber of Commerce and the  
Convention and Visitors Bureau. Oversaw planning and implementation of  
business plan. Supervised four employees. Led and motivated volunteers.  
Developed and administered annual budgets totaling \$260,000.

ACCOMPLISHMENTS:  
❖ 1996 Graduate of Institute of Organizational Management. Colorado  
University  
❖ Minnesota Chamber of Commerce Executive Board Chairman.  
❖ Kansas Chamber of Commerce Executive Board Chairman  
❖ 2000 Mid-America Chamber Executive Board Chairman.  
❖ Listed in 2000-01 Nationwide Register's Who's Who in Executives and  
Business.  
❖ 1991 Graduate of Leadership Rice County.  
❖ 1997 and 2001 Class advisor for Institute of Organizational Management.  
❖ United Way of the Flint Hills Board Chairman.  
❖ National Teachers Hall of Fame Board of Governors.

SPECIAL INTEREST: Quilting, golf, working on our home.

REFERENCES: Available Upon Request.

**KANSAS GOVERNOR SEBELIUS APPOINTMENT QUESTIONNAIRE**

Position for which you are applying: Kansas Lottery Commission

Full Name (please include title and middle name): Jeanine M. McKenna

Home Address: 2667 Road V., Reading Kansas Lyon County  
(City, State, Zip) (County)

Business Address: 719 Commercial, Emporia, Kansas Lyon County  
(City, State, Zip) (County)

Business Name: Emporia Area Chamber of Commerce

Position Title: President/CEO

Home Phone: 620-699-3312 Business Phone: 620-342-1600 Cell Phone: 620-343-0796

Facsimile No: 620-342-3223 E-Mail Address: jmckenna@emporiakschamber.org

Driver's License No: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Date of Birth: 12-12-66 Place of Birth: Hutchinson, Kansas Kansas resident? Yes

Registered Voter? Yes Party Affiliation: Republican

Congressional District: 1 Kansas Senate District: \_\_\_\_\_ Kansas Representative District: \_\_\_\_\_

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

Education: BA Fort Hays State University

Employment Experience: 16 in Chamber management. Started in Lyons Kansas, moved to New Ulm, Minnesota and moved back to run the Chamber in Emporia in August of 2000. Graduate from the Institute of Organizational Management from the University of Colorado.

Do you hold any professional licenses? If so, please provide numbers: N/A

What special skills could you bring to this position? Working with the business community, travel and tourism and marketing.

Previous government appointments: This is a re-appointment to the Lottery Commission.  
(Please provide dates)

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

**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: Previous service on the Kansas Lottery Commission.

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:

**Graduate of the Institute of Organizational Management through the U.S. Chamber at the University of Colorado.**

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.

**Chair of United Way of the Flint Hills**

**Board member of the National Teachers Hall of Fame**

**Board member of the Healthier Community Alliance**

**Immediate Past Chair of the Kansas Chamber of Commerce Executives**

**Past Chair of the Mid-America Chamber Executives**

**Past Chair of the Minnesota Chamber Executives.**

**Member of Rotary International**

5. **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.

**I have enjoyed my time on the Kansas Lottery Commission. The Governor should be proud of the staff at the Kansas Lottery, and know that they work hard to promote the State in a positive image. I will gladly accept the responsibilities and the challenges that will take place in the upcoming term. Thank you for your consideration.**

**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 **As a current member of the KS Lottery Commission.**
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. **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 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. **I testified this year before the Senate Federal and State Affairs committee this year in support of a consolidation bill. I believe the bill number was SB 461.**

- 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 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, 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? **No** \_\_\_\_\_ **Yes X**
- 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 X Yes** \_\_\_\_\_

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

Name: **Teresa Gross** Relationship to you: **Lifetime/long Friend**

Telephone: **785-625-4071 (Hays, Ks.)**

Name: **Larie Schoap** Relationship to you: **Former Chairman of the Board**

Telephone: 620-343-3301

Name: **Sharon Vernon** Relationship to you: **Co-Worker at the Chamber**

Telephone: 620-342-1600 Work

Name: **Dale Davis** Relationship to you: **Member and former chair of the Board**

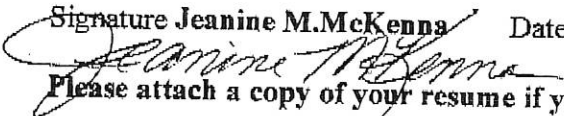
Telephone: 620-342-2550

#### **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 **Jeanine M. McKenna** Date **4-19-2006**

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



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

McKenna  
Last Name

Cleanie  
First Name

M  
MI

MARK  
Spouse's Name

2167 Road V Reading, KS 66868  
Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number

Reading KS 66868  
City, State, Zip Code

620-699-3312  
Home Phone Number (include area code)

620-342-1600  
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.

Kansas Lottery Commission

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

Division if applicable (May use acronyms)

Commissioner  
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.

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.	Retirement 401 (K) Jeanine - American Chamber of Commerce Executive	401 K	41,095.03		
2.	Retirement - MACK KPERs	KPERs	100% July 1, 2006 13,539.22 as of 12-31-04		
3.					
4.					
5.					
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.			
2.			
3.			

**F. 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.	Emporia Chamber of Commerce	719 Commercial	Non-Profit
2.		Emporia, KS 66801	Business Organization

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
1.	Lyon County	430 Commercial	Government
2.	-Facilities Manager	Emporia, KS 66801	

**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.	United Way of the Flint Hills	Chairman	Jeanine
2.	National Teachers Hall of Fame	Board Member	Jeanine
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.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			

H. DECLARATION:

I, Jeanine McKenna 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.

March 22, 2006  
Date

Jeanine McKenna  
Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES 0

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