# Senate Confirmation Information Summary

# Prepared and Submitted by the Office of Governor Sam Brownback

Appointee: Robert Chestnut

Position: Member, Pooled Money Investment

Board

Expiration Date: March 15, 2016

Term Length: 4 years

Statutory Authority: K.S.A. 75-4221a

Party Affiliation: R

• Statutory geographic representation

Congressional District: 2

requirements: N/A

County: Douglas

Size Requirement (if any): Five members

Other, specify:

- Statutory party affiliation requirement: No more than 3 members are to be of the same political party.
- Statutory industry or occupation requirements: All members of the Board must have at least 10 years of direct work experience in the areas of finance, accounting or management of investments.

Salary: N/A

Predecessor: himself

Board Composition Prior to Confirmation of Appointee:

See attached board report.

Senate Ways and Means Date: 05-01-2012

Attachment:

3

Capitol Building Room 241-South 300 SW 10th Street Topeka, KS 66612



Phone: (785) 296-3232 Fax: (785) 368-8788 governor@ks.gov

Sam Brownback, Governor

April 4, 2012

To the Senate of the State of Kansas:

am Burlick

Submitted herewith for confirmation by the Senate are appointments made by me as the Governor of the State of Kansas, pursuant to law.

Sam Brownback Kansas Governor

Member, Board of Indigent Defense Services, Andrew D. Wimmer [R], Overland Park, pursuant to the authority vested in me by K.S.A. 22-4522 effective upon the date of confirmation by the Senate, to serve a three year term, to expire January 15, 2014, to succeed Roy Holliday.

Member, Kansas Bioscience Authority, Dale A. Rodman [R], Topeka, pursuant to the authority vested in me by K.S.A. 74-99b04 effective upon the date of confirmation by the Senate, to serve a four year term, to expire March 15, 2016, to succeed Sandra Lawrence.

Member, Pooled Money Investment Board, Robert Chestnut [R], Lawrence, pursuant to the authority vested in me by K.S.A. 75-4221a effective upon the date of confirmation by the Senate, to serve a four year term, to expire March 15, 2016, to succeed himself.

## Pooled Money Investment Board

Members: Appointed by Appointments Senate

Legislators: 0 Governor 4 4

House: 0 Ex officio(s)

Non-Legislative: 5 State Treasurer

Total Members:

## **Entity Description**

KSA 75-4221a *et seq.* established the five-member Pooled Money Investment Board, four of whom must be appointed by the Governor, subject to confirmation by the Senate. The fifth member must be the State Treasurer. At any time may not more than three members of the Board be of the same political party.

All members appointed to the Board must have at least ten years of direct work experience in the areas of finance, accounting or management of investments, or must have at least a baccalaureate degree from an accredited college or university and at least five years of direct work experience in the areas of finance, accounting, or management of investments.

Members appointed by the Governor must serve for a term of four years and until successors are appointed and confirmed. The Governor must select one of the Board members to serve as a Chairperson.

Members receive compensation, subsistence allowances, mileage and other expenses. If a member is terminated from his or her position with the Board, the member cannot accept employment with the Pooled Money Investment Board for one year.

# Pooled Money Investment Board

### Powers and Duties

The Board has the power to:

- Invest money available from the State General Fund and other state funds deposited with the State Treasurer;
- Provide investment management services for other state agencies with investment portfolios, such as the Kansas Department of Transportation and Health Care Stabilization funds;
- Manage and administer the Kansas Municipal Investment Pool, which provides an investment alternative for local government entities in Kansas; and
- Appoint a Director of Investments.

# Pooled Money Investment Board

Total Appts: 5 Gov Appts: 4 Notes: Length: Term

4 yrs.

SSI: Yes

Compensation Statute:

Party Ratio: 3:2

Statute: KSA 75-4221a

Confirmation: Yes

No more than 3 members of the same political party. Governor selects Chair. And Gov appoints 4 with at least 10 years of direct work experience in the areas of finance, accounting or management of investments or shall have at least a baccalaureate degree and at least five years of direct work experience in the same areas. Other member is the State Treasurer

Contact: Scott Miller

(Pho) ne:-7852967053 900 SW Jackson St, Room 209 Topeka, KS 66612-1229

Appointed By:

Meeting Frequency: |Location of Meetings: Topeka, LSOB -- Room 201|Meetings Frequency: Monthly, plus

Current Chair:

Appointed By: Governor

Term Limit: Gov Appt Counts Male/Female <u>3:</u> 1st-2nd-3rd-4th 0:2:1:1 R/D/U 2:1:2

Douglas County Republican Party Affiliation KS03 CD 45h 2sico Appointment Date 5/4/2011 Expire Date 3/15/2012 Reapt

Appointed By: GOVERNOR Predecessor: Thomas Thull Position: Public member robchestnut@sunflower.com 1105 Oak Tree Dr Lawrence, KS 66049-3869 Mr. Robert Chestnut

Nominations:

Ms. Betty A. Corbin

corbininvest@fultonvalleyfarms.com 5079 Southwest Fulton Road Towanda, KS 67144-9097 Position: Member Reason for Departure: Butler Republican Party KS04 75h 16s 1/19/2011 3/15/2014

Predecessor: John Clelland

Appointed By: GOVERNOR

Nominations:

Reason for Departure:

Leavenworth

Democratic Party

KS02

41h

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6/18/2008

3/15/2012

Position: Public member

nbdawson@sbcglobal.net, Mr. Norman B. Dawson 2100 Ceder Ridge Dr Leavenworth, KS 66048-2475

nbdawson@kc.rr.com

Predecessor: himself -- reappointed

Appointed By: GOVERNOR

Reason for Departure:

Mr. John W. Lehman 423 East 47 Highway Girard, KS 66743-9492 jwlehman@ckt.net

Position: Treasurer
Predecessor:
Appointed By:
Nominations:

Reason for Departure:

Crawford

Independent Party

KS02

24

13s

5/6/2010

3/15/2014

Position: Public member
Predecessor: himself – reappointed

Nominations:

Appointed By: GOVERNOR

Reason for Departure:

3-6

# Robert H. Chestnut, CMA

1105 Oak Tree Drive, Lawrence, Ks. 66049 robchestnut@sunflower.com

(785) 764-3220

## Chief Financial Officer / Senior Financial Executive

Career Track: Professional growth through positions including Accountant, Financial Analysis Manager, Division Controller, VP – Finance, COO of a start-up venture, and CFO of privately held companies.

Management Experience in Diverse Corporate Structures: Over the past 25 years I have managed a wide variety of resources in a number of complex organizations. This diversity has allowed me to develop significant knowledge in IT, HR, and all financial disciplines.

Strategic Thinker: I have been a major contributor to the strategic development of several organizations. I am skilled at translating strategies into financial deliverables incorporated into action.

International Experience: My career has given me the opportunity to manage business transactions in Europe, Mexico, and the Far East.

BS in Accounting - University of Kansas, MBA - University of Kansas

# **Selected Achievements & Skills**

- □ Completed a stock acquisition and financing arrangement for a privately-held company. I directly assisted the founder's son in valuation and acquisition of the remaining shares and real estate of Allen Press, Inc. in 2008. This included coordinating and interpreting appraisals, negotiation with shareholders and execution of a credit facility with US Bank.
- □ Directed all internal and external reporting for organizations ranging from \$500 million to >\$1 billion in sales. Farmland, Variform and Remel are complex, multinational organizations requiring significant understanding of GAAP and SEC reporting requirements.
- Led fundraising efforts for a start-up and an existing manufacturer. My experience in financing arrangements includes lease, venture capital, and asset-based lending transactions. I was successful in raising \$13 million for a manufacturer with challenging trading conditions.
- I have taught at several local universities. My oral and written communications skills are highly developed with over a decade of teaching experience at both the graduate and undergraduate level.
- ☐ I have proudly served my community as a locally elected City Commissioner.

# **Career Achievement Summary**

- □ Chief Financial Officer and Member Nationwide Learning, LLC 8/2011 to Present
  - Manage all financial aspects of a firm held by private equity. Nationwide provides a learning experience in the classroom by providing a free publishing program for student authors.
- ☐ Chief Financial Officer Allen Press, Inc. 12/2005
  - Manage financial reporting, information technology, billing, contracts and HR for a private company that is a leading provider of print and services for societies in the science, technology and medical fields.
- □ Chief Financial Officer Thermo Fisher Scientific Microbiology 6/2003 to 12/2005
  - Managed all financial reporting, information technology, billing and collections for a global manufacturing leader in microbiology owned by Thermo Fisher Scientific.

# **Career Achievement Summary**

#### ☐ Chief Financial Officer - API Foils Inc.

3/2001 to 6/2003

Managed the financial, human resource and administrative functions for a global manufacturer
of decorative and security foils. The company is part of API Group plc, a UK-based company
traded on the London exchange.

#### ☐ Chief Operating Officer – Sellmeat.com

2/2000 to 3/2001

- Formed a business-to-business trade exchange with three partners that launched with private funding in early 2000. I was responsible for all activities of the company including sales, marketing, development, finance and administration.
- Developed and presented the businesses plan to investor groups and venture capital firms across the nation. These efforts led to private funding to launch the site.
- Secured a \$5 million funding term sheet that was not closed due to market conditions in mid-2000.

#### ☐ Vice President - Finance - Variform Inc.

10/1995 to 2/2000

- Managed all financial reporting, cash management and information technology for a \$250 million domestic manufacturer in building materials. One of three corporate officers of the company.
- Contributed analysis and due diligence on two strategic acquisitions by the organization.
- Directed external audits and SEC reporting for the business as it was acquired during the middle of my service with the organization.

#### ☐ Division Controller – Farmland Foods Inc.

1/1990 to 10/1995

- Responsible for payroll, general ledger reporting and accounts payable for a \$1.5 billion subsidiary of Farmland Industries, the largest agricultural cooperative during the 1990's.
- Completed analysis and due diligence on several acquisitions and dispositions within the portfolio of companies held by Farmland Foods.
- Directed all audit activities and SEC reporting for the company.

#### □ Senior Analyst - Sprint

1/1987 to 1/1990

- Negotiated credit and leasing agreements for the corporation.
- Evaluated the credit risk of prospective partners.
- Determined cash funding requirements for the long-distance partnership.

#### ☐ Financial Accountant – Butler Manufacturing Inc.

12/1984 to 1/1987

- Worked in the corporate accounting department consolidating 8 divisions of a \$750 million public company.
- Organizational Memberships and Other Experience
  - Memberships and Other Activities
    - Kansas Pooled Money Investment Board Appointed by Governor Brownback
    - Leadership Kansas Class of 2011 Statewide leadership program class
    - Elected Lawrence City Commission in April, 2007 for a 4-year term
    - Audit Committee Kansas University Alumni Association
    - Institute of Management Accountants
  - Adjunct Faculty Member
    - Baker University, Johnson County Community College, Webster University

# Kansas Senate

# CONFIRMATION OVERSIGHT COMMITTEE

# APPOINTMENT QUESTIONNAIRE

(please include title and middle name along with any names previously used)
Home Address: 1105 Oak Tree Drive Lawrence, Ks 66049
* Driver's License Number: *Social Security Number: *City, State, Zip)
Position to which Appointed: Member - Pooled Money Investment Bu
Appointing Authority: Governor

\* The driver's license and social security numbers will not be made public but are used by the KBI and Department of Revenue.

Form 08 08 · Page | Rev. 07 ||

1	(for Committee use only)		
1	KBI Check: N/A_	In-Process	Complete
	DOR Check: N/A	In-Process	Complete

This Questionnaire is to be fully completed by each appointee appearing before the Senate Confirmation Oversight Committee (Committee) and returned to the Committee Chairman's Office. A meeting of the Committee to consider an appointee will not be scheduled until a completed questionnaire and other forms are received by the Chairman. Please answer each question completely to the best of your knowledge. Should a question not be applicable, please so state. Hand-written responses are strongly discouraged. If filling out this form electronically, "\subseteq" should be replaced with "X" by the appropriate response on the form. Please contact your appointing authority if you have questions when completing the form. Full Name: (please include title and middle name along with any names previously used) Pooled Position to which Appointed: Appointing Authority: phionwide Home Phone: 785-830-8522 Business Phone: 800-867-2212 Cell Phone: 785-764-3220 Fax Number: 800.862- 2297 Kansas resident? BYes / DNo \* Date of Birth: Party Affiliation: Ke1306/1Ca4 Registered Voter? Congressional District: Kansas Senate District: Z Kansas Representative District: Resident County: Douglas Please answer the following questions numbered 1 - 43. Each question MUST BE ANSWERED ON THIS ORIGINAL FORM. If the answers the question are provided on your resume, please state "See Resume" or if you supply additional attachment(s) with answers, please state "See Attachment(s)" on this form. What is your educational background? RS Accounting / MBA

University of Lingus

Describe your employment experience. Include any expertise related to the position to which you 1. 2.

\* Date of Birth will not be made public but will be used by the KBI

See Kesume

were appointed.

Form 08.08 - Page 2 Rev 07 ||

3.	List any professional licenses that you have obtained and include the number for each license.
4.	Why do you feel you are a good candidate for the position to which you have been appointed?
5.	Why do you feel you are a good candidate for the position to which you have been appointed?  The currently serve on the board.  What do you see as the purpose or mission of the role to which you have been appointed? The State  Military Service: List rank, date and type of discharge from active service.  Of lens of.
6.	Military Service: List rank, date and type of discharge from active service.
7.	Government Experience: List any experience or association with local, state or federal government (exclusive of elective public office but including advisory, consulting, honorary, appointed or other part-time service or positions) and include dates of service.  None
8.	Elective Public Office: List all elective public offices sought and/or held with dates of service.  None  4/07-4/11  Lawrence City Commission
9.	Campaigns: Have you ever played a role or held a position in a political campaign? If so, please identify the candidate(s), the dates of the campaign and describe your involvement.  No Tyes  Ran my own campaign for others.  Honors and Awards: List all scholarships, fellowships, honorary degrees, honorary society
10.	Honors and Awards: List all scholarships, fellowships, honorary degrees, honorary society memberships and any other special recognition for outstanding service or achievements.  None Institute of Management Accountants  Leadership Kontas - Zull
11.	Organization Affiliations: List all civic, cultural, educational, charitable, or work-related organizations that you have been associated with in the past ten years. Include any position held in the organization and the dates of service.  None  See Resume
12.	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 so, please describe.
13.	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 Dives Many as Lowrence City Commissioner
14.	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 particularly controversial issue other than in an official governmental capacity? If so, please describe.  No Pres  May at Lowrence City Commissioner
15.	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 so, please describe.

16.	Opposition: Do you know of any person or group who might take overt or covert steps to attack, even unfairly, your appointment? If so, please identify and explain the basis for the potential attack.  Tho DYes
17.	Miscellaneous: List any factors, other than the information provided above, which particularly qualifies you or is relevant to the position to which you are seeking appointment? Include any special skills.  None  See Resume
18.	Relationship to Governmental Employees: Are you or your spouse or other close family members related to any state governmental official or employee? If so, please provide details. The Tyes
19.	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 so, please explain.  Reimbursed expenses for DNO WYES  Replied Money Investment Boo
20.	Business Relationships: Describe 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.
21.	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 so, please explain.  No DYes
22.	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 have been appointed, please indicate the employer, the position and the length of time it has been held. If not, please so state.  No Tyes
23.	Lobbying Activities: Describe any lobbying activity during the past ten years in which you and/or your spouse have engaged for the purpose of influencing the passage, defeat or modification of any legislative or administrative action. 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.
24.	Regulated Activities: Describe 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.

25.	Other: Please describe 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 have been 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.  Whone
26.	Conflict of Interest: How would you resolve any potential conflicts of interest that, while maybe unforeseen at this point in time, could arise?  DISCIOSE Cud evolution.
27.	Citations: Have you ever been cited for a breach of ethics for unprofessional conduct, or been named in a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group? If so, please provide details.  No DYes
28.	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 traffic infraction? (Please include any offenses of driving under the influence, operating while impaired, reckless driving, or the equivalent offenses in other states.) If so, please explain.  The Property of the please of the please of guilty or nolo contendere or forfeited collateral for any criminal violation other than a traffic infraction? (Please include any offenses of driving under the influence, operating while impaired, reckless driving, or the equivalent offenses in other states.) If so, please explain.
29.	U.S. Military Convictions: Have you ever been convicted by any military court? If so, please provide details.  □No □Yes
30.	Imprisonment: Have you ever been imprisoned, been on probation or been on parole? If so, please provide details. ☑No ☐Yes
31.	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 so, please provide details.
32.	Agency Proceedings and Civil Litigation of Affiliates and Family: a.) Is your spouse or other close family member currently, or 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 so, please provide details.
	b.) 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 so, 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.)

33.	Other Litigation: a.) Other than the litigation described in question 32, 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 so, please describe.  Tho Tyes  b.) Are you aware of any pending or anticipated litigation against you or any business in which you are an officer, director, or partner? If so, please describe.  Tho Tyes
	□ INO □ Yes
34.	Drivers License: Has your driver's license ever been suspended or revoked? If so, please describe.  No DYes
35.	Parking Tickets: Do you have outstanding parking tickets from any jurisdiction that have remained unpaid for more than 60 days? If so, please explain.
36.	Security Clearance Denial: Have you ever been denied a military or other governmental clearance? If so, please explain.
37.	Firings: a.) During the past ten years, have you been fired from a job for any reason? If so, please explain.  The Property of the past ten years, have you been fired from a job for any reason? If so, please explain.
	<ul> <li>b.) During the past ten years, have you quit a job after being told that you would be fired? If so, please explain.</li> <li>□No □Yes</li> </ul>
	c.) During the past ten years, did you leave a job by mutual agreement because of specific problems? If so, please explain. ☑No ☐Yes
38.	Alimony and Child Support: Are you now, or have you ever been, delinquent in the payment of alimony or child support? If so, please explain  No Tyes
39.	Consumption of Alcohol: Have you ever or are you currently abusing alcohol? If so, please explain. ☑No ☐Yes
40.	Controlled Substances: Have you ever or are you currently engaged in the illegal use of a controlled substance or abusing the use of a prescribed controlled substance? If so, please explain.
41.	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?

- Governmental Delinquencies: Are you delinquent in the payment of any obligation owed to the federal or state government or any political or taxing subdivision or any instrumentality thereof? (Include delinquencies in the payment of: Income, property, or other taxes; exactions, fees or special assessments; loans, including any defaults, on or under loans which are or were made by, guaranteed, insured or subsidized by any unit of government or instrumentality thereof; overpayment of benefits; required payments into or under governmental programs; payments under a diversion arrangement or other repayment schedule.) If applicable, please state whether such delinquency is under formal appeal.
- 43. Other: Please provide any additional information, favorable or unfavorable, which you feel should be considered in connection with your appointment. If none, please so state. 

  ☑None

Please include resume and completed Statement of Substantial Interest not more than twelve months old.

$\overline{}$		REFERENCES
Name: Dave	Corliss	_ Knows you how?: Crty Manager - Work Acsoc.
Address:		
Home Phone:		Business Phone: 785-832-3403
		Knows you how?: Work with at ICU Alumni
Address:		(0)
Home Phone:		Business Phone: 785-864-5-397
Name: Chod	Zimmerman	Knows you how?: Work with at Nitionwide
Address:		
Home Phone:		Business Phone: 612-578-1294
	y Mortin-Smit	Knows you how?: Long-term Friend
		(City, State, Zip)
Home Phone:		Business Phone: 785-842-1575

## 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

Form 08:08 - Page 8

# CONFIRMATION COMMITTEE

**OVERSIGHT** 

Acknowledgement of Release of Tax and Form Kansas

Criminal Records Information

Senate

I,	Robert	Chestnut	_ acknowledge that as part of the
	(print name)		_ was a pint of the

Senate Confirmation Oversight Committee process I will:

- be subject to a criminal records background investigation by the Kansas Bureau of Investigation; and
- · have my tax records released by the Kansas Department of Revenue.

Such information will not be released to the general public, but will be made available for review at the appropriate time by:

- Myself;
- My appointing authority;
- · Chairperson of the Senate Confirmation Oversight Committee; and
- The Vice Chair of the Senate Confirmations Oversight Committee.

By signing the "Authorization and Certification" section (on page 8) of the Senate Confirmation Oversight Committee questionnaire, the Kansas Department of Revenue will be authorized to release my tax information and the Kansas Bureau of Investigation will be authorized to conduct a criminal background investigation on me and provide that information to the appropriate individuals.

Signature

Date

3-28-12

#### STATE OF KANSAS



#### KANSAS GOVERNMENTAL ETHICS COMMISSION

#### ELECTRONIC STATEMENT OF SUBSTANTIAL INTERESTS FORM

<u>INSTRUCTIONS:</u> This statement 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:

Chestnut	Robert	H			
Last Name	First Name	MI			
Melissa J Chestnut					
Spouse's Name					
1105 Oak Tree Drive					
Number & Street Name, Apartment Number,	Rural Route, or P.O. Box Number				
Lawrence, KS 66049					
City, State, Zip Code					
(785) 830-8522		(785) 764-3220			
Home Phone Number		Business Phone Number			

#### 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;
Γ	4.	Employee of a State Agency or University;
	5.	General Counsel for a State Agency;
	6.	Candidate for State Office.
	7.	Other (Contractor / Member of Compact)

#### Pooled Money Investment Board

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

Board Member

Division	if applicable	May use	acronyme	
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* The Ia	ast f	our digits o	f your soci	al security	number w	ill aid in i	identifying	you fro	m others	with the	same	name	on the
compu	ıter l	list. This inf	ormation is	optional.	*			-					
	$\neg \neg \neg$			-									
1													

C. <u>OWNERSHIP INTERESTS:</u> 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	1	BY
	Nationwide Learning, LLC	Limited Liability Corp	Member	1.4%	self
	1342 SW 42nd Street, Topeka, Ks. 66609	Limited Liability Corp	Mellinei	1.470	

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

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

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

- E. <u>RECEIPT OF COMPENSATION</u>: (Part 1) 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. Nationwide Learning, LLC	1342 SW 42nd Street, Topeka, Ks. 66609	Children's Book Publisher	
2. Allen Press, Inc.	810 E 10th Street, Lawrence, Ks. 66044	Scholarly Publisher	

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. Nell Hill's Corporation	502 Kansas Avenue, Atchison, Ks. 66002	Retailer - Home Furnishings
2. United Way of Douglas County	2518 Ridge Court, Lawrence, Ks. 66046	Social Service Agency
3. University of Missouri - Kansas City	5100 Rockhill Road, Kansas City, Mo. 64110	State University

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	
	Lawrence Memorial Hospital	Board of Trustee	self	
1.	325 Maine Street, Lawrence, Ks. 66044	Board of Trustee		
2.	Kansas Alumni Association	Member - Audit Committee	self	
	1266 Oread Avenue, Lawrence, Ks. 66045	Wellber - Addit Committee		
	Lawrence Children's Choir	Board Member	spouse	
ა.	Lawrence, Ks.	Doard Welline	Jopouso	
	Pooled Money Investment Board	Board Member	self	
4.	900 SW Jackson, Topeka, Ks. 66612	Doard Method	3011	

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.		

H. <u>DECLARATION:</u> I 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.

Date Electronically Filed:

02/22/2012

Name of Person Making Statement: Robert Chestnut