

Approved: 2-24-10
Date

MINUTES OF THE SENATE FINANCIAL INSTITUTIONS AND INSURANCE COMMITTEE

The meeting was called to order by Chairman Ruth Teichman at 9:30 a.m. on February 16, 2010, in Room 152-S of the Capitol.

All members were present.

Committee staff present:

Ken Wilke, Office of the Revisor of Statutes
Melissa Calderwood, Kansas Legislative Research Department
Terri Weber, Kansas Legislative Research Department
Beverly Beam, Committee Assistant

Conferees appearing before the Committee:

John P. Smith, Credit Union Administrator
James Needham, State Banking Board

Others attending:

See attached list.

John P. Smith, Credit Union Administrator (Attachment 1)

James Needham, State Banking Board (Attachment 2)

The Chair opened the meeting with confirmation hearings for John P. Smith as Credit Union Administrator, and James A. Needham as a member of the State Banking Board. Following brief presentations by each appointee, Senator Kelsey moved that John Smith be confirmed for an additional four-year term as Credit Union Administrator and James Needham for an initial three-year term as a member of the State Banking Board. Senator Steineger seconded. Motion carried. (Attachments 2 and 3)

Action on

SB 415 - Municipalities; bond investments.

Melissa Calderwood, Research Department, gave a brief overview of the bill. She said the primary question had to do with the investment of idle funds. Ken Wilke, Revisor, presented the balloon amendments to SB 415.

Following brief discussion, Senator Masterson moved to approve the balloon amendments to SB 415 as presented by Mr. Wilke. Senator Kelsey seconded. Motion passed.

Senator Steineger moved to pass SB 415 out favorably as amended. Senator Brownlee seconded. Motion passed.

Action on

SB 390 - Regulating the use of genetic testing by insurance and health care entities.

Melissa Calderwood gave a brief overview of the bill. She said this bill was requested by the Kansas Insurance Department regarding the state's genetic testing law enacted in 1997.

The Chair said there were three amendments to be made to this bill. She said it was her opinion that the first two amendments the committee agreed with, which were the "shall nots". She said these two amendments state that insurance companies shall not use the results of a genetic test to raise premiums and they shall not adjust premium contributions on the basis of whether an individual has obtained a genetic test. She said these simply comply with federal law.

Senator Kelsey said he will be voting "no" on this bill as it appears to him to be a solution in search of a problem.

2/16/10

CONTINUATION SHEET

Minutes of the Senate Financial Institutions and Insurance Committee at 9:30 a.m. on February 16, 2010, in Room 152-S of the Capitol.

The Chair said she would just address the two "shall nots" and drop the rest. She said everything from line 7 down would be stricken. She said she is trying to say that genetic testing cannot be used to raise premiums.

Ken Wilke said if Subsection C is stricken in toto, then "Except as permitted by Subsection C" in line 22 will also have to be stricken.

The Chair added that would then comply with federal law and protect anyone who has genetic testing and premiums cannot be raised.

Senator Barnett moved the amendments be approved as presented. Senator Taddiken seconded. Motion passed.

Senator Brownlee moved the bill out favorable for passage. Senator Barnett seconded. Motion carried.

Action on

SB 239 - Enacting the rural risk bank loan guarantee loan program.

Melissa Calderwood gave a brief overview of the bill.

Revisor, Ken Wilke, presented balloon amendments for the Committee's edification as requested by Treasurer, Dennis McKinney.

Following lengthy discussion, many questions were raised by committee members. The Chair recommended that the Treasurer's office research all questions of the committee, including the source of funding, and return next year to work this bill.

Senator Barnett moved to approve the minutes of February 2, 3, 4, 9 and 10. Senator Kelsey seconded. Motion passed.

The next meeting is scheduled for February 17, 2010.

The meeting was adjourned at 10:30 a.m.

**SENATE FINANCIAL INSTITUTIONS & INS. COMMITTEE
GUEST LIST**

DATE: 2-16-10

NAME	REPRESENTING
Don Gaches	GBA
Doug Wareham	KBA
Jerry Drexler	Enterprise Bank
Bobby Olsen	Ks Bankers Assn.
Kari Presley	Kearney & Associates
Halley Parker	KCUA
Shelley Jones-Winner	GKC LTSC
Bill Sreed	DNIP
Cindy Heston	KID
Linda Sheppard	KID
Maree Carpenter	KAMP
Stuart Little	Community Bankers Assoc.
Michelle Lancaster	Washburn Student
Gail Bright	Office of the KS Securities Commissioner
Stann Mitchell	Community Bankers
Terri Spielman	KAIA

Senate Confirmation Information Summary

Prepared and Submitted by the Office of Governor Mark Parkinson

Appointee: John P. Smith

Position: Administrator,
Credit Union Council

Term Length: Four years

Expiration Date: December 31, 2013

Statutory Authority: K.S.A. 17-2233

Party Affiliation: Democrat

⇒ Statutory geographic representation:

Congressional District:

⇒ Requirements *(insert any that apply)*

County:

Size requirement *(if any)*:

Other, specify: The administrator shall not be a member of the Council.

⇒ Statutory party affiliation requirement:

⇒ Statutory industry or occupation

Salary:

Predecessor: Himself - Reappointed

Board Composition Prior to Confirmation of New Appointee:
(SEE ATTACHED LIST)

*FI & I Committee
2-16-10
Attachment 1*

Credit Union Council

Gov Appts: 7
Total Appts: 7

Term Length: Three Years' 2 term limit
Notes: The role of this Council is to supervise and regulate credit unions.
 The Council consists of seven members: five shall be members and officers of a Kansas credit union; there must be one member from each congressional district; two members shall represent the general public.

Contact: John P. Smith, Administrator
 Department of Credit Unions
 400 Kansas Avenue, Suite B
 Topeka, KS 66603-3741
 785/296-3021

Terms are three-years and there is a two-term limit.

The Governor appoints the Exec. Director - who stands for SENATE CONFIRMATION

Statute: KSA 17-2232 **Confirmation:** **Gov Appt Counts** Male/Female 1st--2nd--3rd--4th R / D / U **Board Active**
Party Ratio: 4:3 **Term Limit:** **Reg Board** 4 : 4 2 : 2 : 2 : 2 3 : 5 : 0

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

	<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>
Benton, Mr. Gilbert E. 601 N. Birch Cimarron, KS 67835 gilbert@fmikansas.com	Gray	D	1	115h	38s	3/12/2007	3/15/2010	<input type="checkbox"/>
		Position: a member						
		Succeeds: Erich Schaefer						
		Appointed By: Governor						
		Nominations:						
		Statutory Remarks: First District Credit Union Officer						
		Seat #: 006						
Bonner, Ms. Cheryl 325 Homestead Drive Lawrence, KS 66049	Douglas	R	3	44h	3s	3/15/2008	3/15/2011	<input checked="" type="checkbox"/>
		Position: a member						
		Succeeds: herself - reappointed						
		Appointed By: Governor						
		Nominations:						
		Statutory Remarks: Third District Credit Union Officer						
		Seat #: 004						

	<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>
Henke, Ms Sue Ellen 1305 SW MacVicar Ave Topeka, KS 66604	Shawnee	R	2	55h	18s	3/14/2008	3/15/2011	<input type="checkbox"/>

Position: 2nd district public member
Succeeds: William McCurley
Appointed By: Governor
Nominations:

Statutory Remarks: 2nd District Public Member

Seat #: 001

Holt, Mr. James D. 1801 E. Tanner Trail Valley Center, KS 67147 jimh@midamerican.coop	Sedgwick	R	4	90h	31s	7/11/2008	3/15/2010	<input checked="" type="checkbox"/>
--	----------	---	---	-----	-----	-----------	-----------	-------------------------------------

Position: a member
Succeeds: Gary Regoli
Appointed By: Governor
Nominations:

Statutory Remarks: 4th CD Credit Union Officer

Seat #: 003 [Details: Large Credit Union]

Malecki, Ms. Carol A. 3615 SW Spring Creek Court Topeka, KS 66614 cmalecki@cox.net	Shawnee	D	2	52h	20s	3/4/2009	3/15/2012	<input type="checkbox"/>
---	---------	---	---	-----	-----	----------	-----------	--------------------------

Position: a member
Succeeds: Mark Kolarik
Appointed By: Governor
Nominations:

Statutory Remarks: Public member

Seat #: 001

Smith, Mr. John P. 23321 W. 45th Terr. Shawnee, KS 66226 john.smith@kdcu.ks.gov	Johnson	D	3	39H	10S		12/31/2009	<input type="checkbox"/>
--	---------	---	---	-----	-----	--	------------	--------------------------

Position: Administrator
Succeeds:
Appointed By: Governor
Nominations:

Statutory Remarks:

Seat #:

	<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>
Strand, Mr. Garth B. 8901 E. 43rd Buhler, KS 67522 garths@hcu.coop	Reno	D	1	104h	34s	3/4/2009	3/15/2012	<input checked="" type="checkbox"/>

Position: a member
Succeeds: himself -- reappointment
Appointed By: Governor
Nominations:

Statutory Remarks: First District Credit Union Officer

Seat #: 007

Williams, Mrs. Alvis
2105 Sierra Hills
Wichita, KS 67230
lawilliams@cstarcu.net

Sedgwick	D	4	87h	30s	3/15/2008	3/15/2011	<input checked="" type="checkbox"/>
----------	---	---	-----	-----	-----------	-----------	-------------------------------------

Position: a member
Succeeds: himself - reappointed
Appointed By: Governor
Nominations:

Statutory Remarks: Fourth District Credit Union Officer

Seat #: 005

PERSONAL RESUME

John P. Smith

23321 West 45th Terrace

Shawnee, Kansas 66226

Home: (913) 322 6571

Office: (785) 296-3021

E-mail: jandcsmith@everestkc.net

Employment history

- | | |
|----------------|---|
| 2006 – present | ◆ Administrator, Kansas Department of Credit Unions |
| 1999 - 2005 | ◆ Director, Missouri Division of Credit Unions |
| 1993 – 1998 | ◆ Administrator, Kansas Department of Credit Unions |

Other work experience

- | | |
|-------------|--|
| 1966 - 1993 | ◆ Manager, Microbiology Laboratory, Wesley Medical Center, Wichita, Kansas |
| 1970 - 1993 | ◆ Adjunct Clinical Professor, Wichita State University College of Health Professions |
| 1976 - 1989 | ◆ Consultant and Panel Member, U. S. Food and Drug Administration |

Military service

- | | |
|-------------|---|
| 1955 – 1993 | ◆ United States Navy and Naval Reserve |
| | ◆ Retired holding rank of Commander, Medical Service Corp |

Professional organizations

- | | |
|-------------|--|
| 1994 – 2009 | ◆ National Association of State Credit Union Supervisors
Secretary/Treasurer 1995 – 1997
Chair-elect 1997 – 1998 and 2004 – 2005
Chair, Professional Standards Committee 2004 – 2005
Chair, Government Relations Committee 2007 - 2009 |
| 1970 – 1993 | ◆ Board of Directors, Wesley Medical Credit Union, Wichita, Kansas |
| 1971 – 1978 | ◆ American Society for Clinical Laboratory Science
Board of Directors, 1971 – 1978
President, 1974 – 1975 |
| 1986 – 1990 | ◆ Southwest Association of Clinical Microbiologists
Founding organizer, charter member and President |

Education

AB, Biology and Chemistry, Emporia State University, Emporia, KS
MS, Kansas State University, Manhattan, Kansas
Continuing education courses in Credit Union Examination,
Finance, Lending, Investments, Compliance and Economics

Personal hobbies/activities

Family, Bicycling, Public Service, and Farming

References

Marla Marsh
President/CEO
Kansas Credit Union Association
650 Westdale Drive
Wichita, KS 67209
marlam@kdca.org

Ken Bonnot
Deputy Director
Missouri Division of Credit Unions
P. O. Box 1607
Jefferson City, MO 65101
(573) 751-3419
ken.Bonnot@cu.mo.gov

Mary Martha Fortney
President/CEO
National Association of State Credit Union Supervisors
1655 North Fort Myer Drive Suite 300
Arlington, VA 22209
(703) 528-8351
MaryMartha@nascus.org

Tom Whitehair
2602 Indy Road
Abilene, KS 67410
(785) 598 2488
(785) 479 1577
buckeye@tctelco.net



CONFIRMATION OVERSIGHT COMMITTEE

Acknowledgment of Release of Tax and Criminal Records Information Form

I, John P. Smith acknowledge that as part of the
(print name)

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.

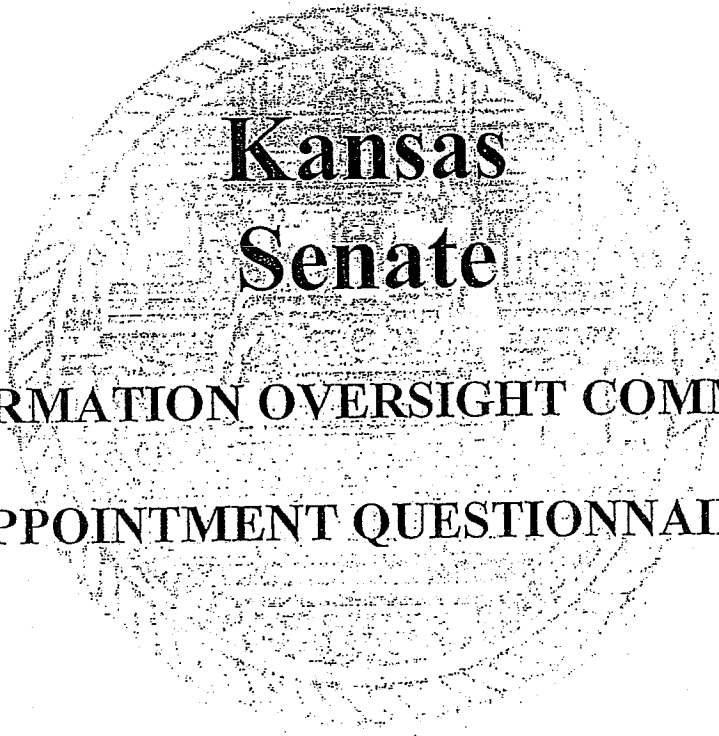
By signing the "Authorization and Certification" section (on page 8) of the Senate Confirmation Oversight Committee questionnaire, the Kansas Department of Revenue will be authorized to release my tax information and the Kansas Bureau of Investigation will be authorized to conduct a criminal background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

Signature

John P. Smith

Date October 27, 2009

Form 08/08



**Kansas
Senate**

CONFIRMATION OVERSIGHT COMMITTEE

APPOINTMENT QUESTIONNAIRE

Full Name: John P. Smith
(please include title and middle name along with any names previously used)

Home Address: 23321 West 45th Terrace, Shawnee, Kansas 66226
(Street Address) (City, State, Zip)

Driver's License Number: [REDACTED] Social Security Number: [REDACTED]

Position to which Appointed: Administrator, Kansas Department of Credit Unions

Appointing Authority: Governor Mark Parkinson

* Information on this page will not be made public but is used by the KBI and Department of Revenue.

(for Committee use only)

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, "" 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: John Paul Smith
(please include title and middle name along with any names previously used)

Position to which Appointed: Administrator, Kansas Department of Credit Unions

Appointing Authority: Governor Mark Parkinson, K.S.A. 17-2233

Home Address: 23321 West 45th Terrace, Shawnee, Kansas 66226
(Street Address) (City, State, Zip)

Business Name: Kansas Department of Credit Unions

Business Address: 400 Kansas Avenue, Suite B Topeka, Kansas 66603
(Street Address) (City, State, Zip)

Position Title: Administrator, Kansas Department of Credit Unions

Home Phone: 913 322 6571 Business Phone: 785 296 3021 Cell Phone: 573 619 3764

Fax Number: 785 296 6830 E-Mail Address: john.smith@kdccu.ks.gov

Kansas resident? Yes / No Date of Birth: 11/10/1937 Place of Birth: Kansas City, Missouri

Registered Voter? Yes Party Affiliation: Democratic

Congressional District: 3rd Kansas Senate District: 10th Kansas Representative District: 39th

Do you have the legal right to live and work in the United States? Yes / No

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.

1. What is your educational background? See Resume
2. Describe your employment experience. Include any expertise related to the position to which you were appointed. See Resume

3. List any professional licenses that you have obtained and include the number for each license.
No professional licenses held relating to Administrator position
4. Why do you feel you are a good candidate for the position to which you have been appointed?
20 years credit union board experience and 14 years regulatory.
5. What do you see as the purpose or mission of the role to which you have been appointed?
Preservation of safety and soundness of Kansas credit unions
6. **Military Service:** List rank, date and type of discharge from active service.
None Retired holding rank of Commander, U.S. Navy following 37 years of active and reserve 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 See resume
8. **Elective Public Office:** List all elective public offices sought and/or held with dates of service.
None City Council, Ozawkie, Kansas 1997 - 1998
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 Yes Treasurer, Jim Clark for Congress 1997
10. **Honors and Awards:** List all scholarships, fellowships, honorary degrees, honorary society memberships and any other special recognition for outstanding service or achievements.
None Several military awards; Alpha Mu Tau honorary medical laboratory science fraternity
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 Naval Reserve Association, Reserve Officers Association, American Legion, Knights of Columbus
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.
No Yes
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 Yes
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 Yes
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.
No Yes

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.
No Yes
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 20 years volunteer credit union experience, 14 years financial regulatory experience in two states (See resume for dates)
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.
No Yes
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.
No Yes Compensation as Administrator, Kansas Department of Credit Unions
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.
None
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 Yes
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 Yes
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.
None Lobbying activity in relationship to duties as Administrator, Kansas Department of Credit Unions 2006 to present
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.
None Farming interests and conservation work have qualified for payments from the Kansas Department of Agriculture

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.
None
26. **Conflict of Interest:** How would you resolve any potential conflicts of interest that, while maybe unforeseen at this point in time, could arise? Cease the activity by resigning or withdrawal of business relationship
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 Yes
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.
No Yes
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.
No Yes Law suit in Douglas County pertaining to regulatory activity as Administrator, Kansas Department of Credit Unions, dismissed.
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.
No Yes
- 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.)
No Yes

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.
 No Yes
 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.
 No Yes
34. **Drivers License:** Has your driver's license ever been suspended or revoked? If so, please describe.
 No Yes
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.
 No Yes
36. **Security Clearance Denial:** Have you ever been denied a military or other governmental clearance? If so, please explain.
 No Yes
37. **Firings:** a.) During the past ten years, have you been fired from a job for any reason? If so, please explain.
 No Yes
 b.) During the past ten years, have you quit a job after being told that you would be fired? If so, please explain.
 No Yes
 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 Yes
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.
 No Yes
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?
 No Yes

42. **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.

No Yes

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.

REFERENCES

Name: Tom Whitehair Knows you how?: Farm business associate

Address: 2602 Indy Road Abilene, Kansas 67410

(City, State, Zip)

Home Phone: 785 598 2488 Business Phone: 785 479 1577

Name: Marla Marsh Knows you how?: Credit union associate

Address: 650 South Westdale Drive Suite 100 Wichita, KS 67209

(City, State, Zip)

Home Phone: 316 832 1749 Business Phone: 1 800 362 2076 Ext. 3022

Name: Ken Bonnot Knows you how?: Former Employee

Address: Missouri Division of Credit Unions P.O. Box 1607 Jefferson City, MO

(City, State, Zip)

Home Phone: Not available Business Phone: 573 751 3419

Name: Mary Martha Fortney Knows you how?: Professional Associate

Address: 1655 North Fort Myer Drive, Arlington, VA 22209

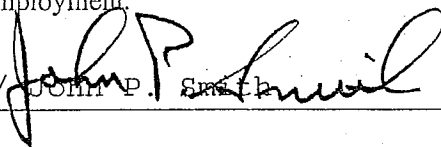
(City, State, Zip)

Home Phone: 703 507 4088 Business Phone: 703 528 8688

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 /s/  JOHN P. SMITH

Date October 27, 2009

STATE OF KANSAS



KANSAS GOVERNMENTAL ETHICS COMMISSION

ELECTRONIC STATEMENT OF SUBSTANTIAL INTERESTS FORM

INSTRUCTIONS: 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:

Smith

Last Name

John

First Name

P

MI

Connie

Spouse's Name

1405 S.W. Summit Woods Drive #1

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

Topeka, KS 66615

City, State, Zip Code

(573) 619-3764

Home Phone Number

(785) 296-3021

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;
- 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)

Kansas Department of Credit Unions

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

Administrator

Division if applicable (May use acronyms)

Position

* The last four digits of your social security number will aid in identifying you from others with the same name on the computer list. This information is optional. *

□□□□

C. OWNERSHIP INTERESTS: List any corporation, partnership, proprietorship, trust, joint venture and every other business, trust, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned with 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.	SmithRing Partnership 23321 West 45th Terrace Shawnee, KS	Farming	Partnership ownership	50%	spouse
2.	ING One Orange Way, Windsor, CT	Investment	Tax deferred retirement account	100%	both
3.	Fidelity Investments P.O. Box 770001 Cincinnati, OH 45277-0003	Investment	Roth IRAs	100%	both
4.	Smith Farming Abilene, KS	Farming	Farming	100%	both
5.	Charles Schwab & Company, Inc. 101 Montgomery St. San Francisco, CA 94104	Mutual Funds	Mutual Funds	100%	both

D. GIFTS OR HONORARIA: List any person or business from whom you or your spouse either individually or collectively, have received gift 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. RECEIPT OF COMPENSATION: (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.	Kansas Department of Credit Unions	400 Kansas Avenue Suite B Topeka, KS	Government
2.	State of Missouri MOSERS Retirement	Jefferson City, MO	Government
3.	Department of the Navy	DFAS Cincinnati, OH	Military
4.	Social Security Administration	Washington, D.C.	Government

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.	State of Missouri MOSIERS	Jefferson City, Missouri	Government retirement
2.	State of Kansas KPERS	Topeka, KS	Government retirement

3. Social Security Administration	Washington, D.C.	Government retirement
-----------------------------------	------------------	-----------------------

F. OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold 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.	SmithRing Partnership 23321 West 45th Terrace Shawnee, KS 66226	Partner	spouse

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. DECLARATION: 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: 04/06/2009
 Name of Person Making Statement: John P. Smith

Senate Confirmation Information Summary
Prepared and Submitted by the Office of Governor Mark Parkinson

Appointee: James A. Needham

Position: Member, State Banking Board

Term Length: 3 years

Expiration Date: March 15, 2012

Statutory Authority: K.S.A. 74-3004

Party Affiliation: Republican

⇒ Statutory geographic representation

Congressional District: Of the six banker members, the Governor shall appoint one from each Kansas congressional district and the remainder from the state at large.

Requirements (*insert any that apply*)

County:

Size requirement (*if any*):

Other, specify:

⇒ Statutory party affiliation requirement:

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

⇒ Statutory industry or occupation requirements:

Six members of the board shall be bankers with not less than five years' actual banking experience in a state bank in this state.

Salary: N/A

Predecessor: Joseph A. Smith

Board Composition Prior to Confirmation of New Appointee:

(SEE ATTACHED LIST)

*F I ; I Committee
2-16-10
Attachment 2*

State Banking Board

Gov Appts: 9
Total Appts: 9

Term Length: Three Years
Notes: Limit of 2 terms; 6 bankers at least 5 years experience in a state bank in Kansas: 1 banker from each CD; the rest at-large members.
3 public members -- no connection to banking. No nonbanker member shall concurrently serve as an officer or director in any state or national bank or trust company wherever located.

Contact: Tom Thull, Bank Commissioner; Judi Stork, F
Office of the Bank Commissioner
700 SW Jackson, Suite 300
Topeka, KS 66603-3796
785/296-2266

Statute: KSA 74-3004
Party Ratio: 5:4

Confirmation: **Gov Appt Counts** Male/Female 1st--2nd--3rd--4th R/D/U **Board Active**
Term Limit: **Reg Board** 8:1 2:2:3:2 2:5:2

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

	<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>
Bias, Mr. Andrew L. 3921 Pine Knot Ct. Wichita, KS 67208 abias@mhrs.org	Sedgwick	D	4	84h	29s	1/8/2008	3/15/2010	<input type="checkbox"/>
Position: a member Succeeds: himself -- reappointed Appointed By: Governor Nominations: Statutory Remarks: Public Member -4th CD Seat #:								
Downing, Mr. Michael R. 1503 Lakeview St. Ellis, KS 67637 ebank@gbta.net	Ellis	I	1	110h	36s	6/18/2008	3/15/2011	<input checked="" type="checkbox"/>
Position: a member Succeeds: Michael D. Stevens Appointed By: Governor Nominations: Statutory Remarks: First District Banker Member Seat #: 009								



Minor, Mr. Melvin
 1338 NE 10th St.
 Stafford, KS 67578
 cdminor@southwind.net

<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>
Stafford	D	1	114h	33s	6/18/2008	3/15/2011	<input checked="" type="checkbox"/>

Position: a member
 Succeeds: himself -- reappointment
 Appointed By: Governor
 Nominations:

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

Seat #: 008

O'Sullivan, Mr. James G.
 12608 Cambridge Rd
 Shawnee Mission, KS 66209
 josullivan@midwesttrust.com

Johnson	U	3	28h	11s	12/20/2007	3/15/2010	<input type="checkbox"/>
---------	---	---	-----	-----	------------	-----------	--------------------------

Position: a member
 Succeeds: himself - reappointed
 Appointed By: Governor
 Nominations:

Statutory Remarks: 3rd CD Banker

Seat #:

Parman, Mr. Mark C.
 10220 Catalina
 Overland Park, KS 66207
 mparman@solutionsbank.com

Johnson	D	3	20h	11s	5/2/2006	3/15/2009	<input checked="" type="checkbox"/>
---------	---	---	-----	-----	----------	-----------	-------------------------------------

Position: a member and chair
 Succeeds: himself -- reappointed
 Appointed By: Governor
 Nominations:

Statutory Remarks: At-Large Banker

Seat #: 007

Schnellbacher, Mrs. Jane A.
 2010 S.W. Bowman Court
 Topeka, KS 66604
 otto66@webtv.net

Shawnee	D	2	55h	20s	5/2/2006	3/15/2009	<input checked="" type="checkbox"/>
---------	---	---	-----	-----	----------	-----------	-------------------------------------

Resign Note: Resigned

Position: a member
 Succeeds: herself -- reappointed
 Appointed By: Governor
 Nominations:

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

Seat #: 006



Smith, Mr. Joseph A.
19600 Udall Road
Erie, KS 66733

<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>
Neosho	D	2	8h	14s	5/2/2006	3/15/2009	<input checked="" type="checkbox"/>

Position: a member
Succeeds: himself -- reappointed
Appointed By: Governor

Nominations:

Statutory Remarks: Second District Banker Member

Seat #: 002

Williams, Mr. Larry
303 E 5th
Halstead, KS 67056

R	4	74h	31s	12/20/2007	3/15/2010	<input type="checkbox"/>
---	---	-----	-----	------------	-----------	--------------------------

Position: member
Succeeds: Richard Rucker
Appointed By: Governor

Nominations:

Statutory Remarks: 4th CD Banker

Seat #: 4th District

Winter, Jr., Mr. Winton A.
737 Indiana
Lawrence, KS 66044
wwinter@epeoples.com

Douglas	R	3	44h	2s	6/18/2008	3/15/2011	<input checked="" type="checkbox"/>
---------	---	---	-----	----	-----------	-----------	-------------------------------------

Position: a member
Succeeds: himself -- reappointment
Appointed By: Governor

Nominations:

Statutory Remarks: At-Large Banker Member

Seat #: 001

Resume
July 21, 2009

James A. Needham age 75 DOB 3-8-1934

Address- Troy, Kansas

Wife, Marjorie M. Needham, Vice President and Secretary of The Troy State Bank.

Two sons J. Kevin Needham Mechanical Engineer, age 39, Employed by Kiewit Power Engineering and M. Tyson Needham Certified Public Accountant age 34, Employed by Assessment Technology.

Education: Graduated from Kansas State University, 1959 with a bachelor's degree in Business Administration.

Graduate School of banking, Madison, Wisconsin 1969.

Employment record;

North Hills Bank, K.C. Mo Assistant Bookkeeper-March 62-November 62

First National Bank Columbus, Kansas Bookkeeper & Loan teller
December 1962-May 1966

First National Bank, Parsons, Kansas Loan teller & Manager of the Installment loan department and Cashier, May 1966 to September 1969

Valley State Bank, Atchison, Kansas September 1969 to September 1974. Started new bank was its first President and CEO.

Purchased The Troy State Bank Troy, Kansas, in 1974-President and Chairman of the board, CEO & Loan Officer.



CONFIRMATION OVERSIGHT COMMITTEE

Acknowledgment of Release of Tax and Criminal Records Information Form

I, James Arthur Needham acknowledge that as part of the
(print name)

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 James A. Needham Date 7-21-2009



**Kansas
Senate**

**CONFIRMATION OVERSIGHT COMMITTEE
APPOINTMENT QUESTIONNAIRE**

Full Name: James Arthur Needham
(please include title and middle name along with any names previously used)

Home Address: 320 North Liberty Troy, Kansas 66087
(Street Address) (City, State, Zip)

Driver's License Number: [REDACTED] Social Security Number: [REDACTED]

Position to which Appointed: Kansas State Banking Board

Appointing Authority: ~~Kansas State Senate~~ GOVERNOR

* Information on this page will not be made public but is used by the KBI and Department of Revenue.

(for Committee use only)		
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, "☐" 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: James Arthur Needham
(please include title and middle name along with any names previously used)

Position to which Appointed: Kansas state Banking Board

Appointing Authority: Kansas State Senate

Home Address: 320 North Liberty Troy, Kansas 66087
(Street Address) (City, State, Zip)

Business Name: The Troy State Bank

Business Address: 121 South Main Troy, Kansas 66087
(Street Address) (City, State, Zip)

Position Title: President/Chairman of the Board/Owner

Home Phone: 785-985-2412 Business Phone: 785-985-3511 Cell Phone: 816-392-0347

Fax Number: 785-985-3514 E-Mail Address: jneed@embarqmail.com

Kansas resident? Yes / No Date of Birth: 03-08-1934 Place of Birth: Atchison, Kansas

Registered Voter? Yes Party Affiliation: Republican

Congressional District: 2nd Kansas Senate District: #1 Kansas Representative District: #63

Do you have the legal right to live and work in the United States? Yes / No

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.

1. What is your educational background? Bachelor in Business Administration-Kansas State Universtiy
2. Describe your employment experience. Include any expertise related to the position to which you were appointed. 46 years in banking. worked as a bookkeeper, teller, loan officer and CEO

3. List any professional licenses that you have obtained and include the number for each license.
Insurance agent, Life and Accident & Health-Kansas-#4914200
4. Why do you feel you are a good candidate for the position to which you have been appointed?
Banking experience and general business back ground
5. What do you see as the purpose or mission of the role to which you have been appointed?
Help establish policy and over see the Kansas Banking department.
6. **Military Service:** List rank, date and type of discharge from active service.
None SP4E4, Discharged 4, July 1963, Honorable Discharge
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
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 Yes
10. **Honors and Awards:** List all scholarships, fellowships, honorary degrees, honorary society memberships and any other special recognition for outstanding service or achievements.
None
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. Community Bankers Association of Kansas.
None Independent community Bankers Association
Kansas Bankers Association, Lions Club,
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.
No Yes
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 Yes
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 Yes
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.
No Yes

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.
 No Yes
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
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.
 No Yes
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.
 No Yes
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.
 None
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 Yes
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 Yes
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.
 None
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.
 None Own and manage The Troy State Bank, Troy, Kansas that is regulated by The Kansas State Banking Department.

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.
 None
26. **Conflict of Interest:** How would you resolve any potential conflicts of interest that, while maybe unforeseen at this point in time, could arise? Abstain from any discussion or vote on any matter that is a conflict of interest.
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 Yes
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.
 No Yes
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.
 No Yes
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.
 No Yes
- 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.)
 No Yes

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. St. Joe Art Glass Works sued The Troy State Bank in 1974. Settled in 1975. William E. Orcutt sued myself as an officer of TSB. All activities were through district court.
 No Yes
 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.
 No Yes See above
34. **Drivers License:** Has your driver's license ever been suspended or revoked? If so, please describe.
 No Yes
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.
 No Yes
36. **Security Clearance Denial:** Have you ever been denied a military or other governmental clearance? If so, please explain.
 No Yes
37. **Firings:** a.) During the past ten years, have you been fired from a job for any reason? If so, please explain.
 No Yes
 b.) During the past ten years, have you quit a job after being told that you would be fired? If so, please explain.
 No Yes
 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 Yes
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.
 No Yes
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?
 No Yes

42. **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.

No Yes

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.

REFERENCES

Name: Eugene C. Hegarty Knows you how?: Professionally and Friend of

Address: P. O. Box 111 Family
Effingham, Kansas 66023
(City, State, Zip)

Home Phone: 913-367-1964 Business Phone: 913-833-5560

Name: Robert J. Bednar Knows you how?: Served on TSB board of directors.

Had to resign when appointed judge
Address: 1105 Independence Court Atchison, Kansas 66002
(City, State, Zip)

Home Phone: 913-367-4782 Business Phone: 913-367-7400

Name: James Birkbeck Knows you how?: Served on BBOK together

Address: 401 Commanche Holton, Kansas 66436
(City, State, Zip)

Home Phone: 785-364-4302 Business Phone: 785-364-3131

Name: Bruce A. Schriefer Knows you how?: Served on BBOK board

Address: 8424 Tipperary Street Wichita, Kansas 67206
(City, State, Zip)

Home Phone: 316-634-6146 Business Phone: 800-999-5725

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 James H. Hedlman

Date 7-21-2009



Sec. of St. bar code

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

Needham	James	A.
Last Name	First Name	MI
Needham	Marjorie	M
Spouse's Name		
320 North Liberty		
Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number		
Troy, Kansas 66087		
City, State, Zip Code		
785-985-2412	785-985-3511	
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 State Office;
- 6. Candidate for State Office;
- 7. Other (Contractor / Member of Compact).

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

Kansas state Banking Board

Agency	Division if applicable (May use acronyms)	Position
* The last four digits of your social security number will aid in identifying you from others with the same name on the computer list. This information is optional.		

3	8	4	5
---	---	---	---

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. G&R, Inc. PO Box 187, Troy, Ks 66087	Bank holding Co. GG	100% Common Stock	100% with Spouse	jt / spouse
2. 80 acres of land in Atchison, Co. , Kansas ; Lancaster, Ks	Land	100% owned	100% Owned	myself
3. 86 acres of land in Doniphan Co. Highland, Kansas	Land	Owner	100%	myself
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 X .

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

- 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.	The Troy State Bank	121 S. Main Troy, Ks.	Commercial Bank
2.	Needham Farms	320 N. Liberty, Troy, Ks	Farming

- 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.	The Troy State Bank	121 S. Main, Troy, Ks.	Commercial Bank
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.	D. C. Development, Inc. 121 S. Main, Troy, KS 66087	Secretary	James A. Needham
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 X .

	NAME OF CLIENT / CUSTOMER	ADDRESS	RECEIVED BY
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			

H. **DECLARATION:**

I, James A. Needham, 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.

August 26, 2009
Date

James A. Needham
Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES 0

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