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**Campaign Finance
Statement of Organization
For Political Action Committees
And Party Committees**

Governmental Ethics Commission
901 S. Kansas Ave.
Topeka, KS 66612
Office (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is a (Check one) **Party Committee** **PAC**

This is an (Check one) **Initial Appointment** **Amended Statement**

Committee Name: **Atchison County Democratic Party**

Address: **1507 Fairway Dr**

Address2:

City: **Atchison** State: **KS** Zip: **66002**

Business Phone: **(913) 426-5450**

Email Address: **gordondmyers@yahoo.com**

Chairperson Name: **Gordon Myers**

Address: **1507 Fairway Dr**

Address2:

City: **Atchison** State: **KS** Zip: **66002**

Home Telephone: Business Phone: **(913) 426-5450**

Email Address: **gordondmyers@yahoo.com**

Treasurer Name: **John Settich**

Address: **8664 Deer Creek Rd**

Address2:

City: **Achison** State: **KS** Zip: **66002**

Home Telephone: **(913) 367-5340** Business Phone: **(816) 646-1552**

Email Address: **jfsettich@aol.com**

Affiliated or Name: **none**

Connected Address:

Organizations Address2:

City: State: Zip:

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

no affiliated organizations

I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **1/12/2023 11:01:57 AM** Signature of Chairperson: **Gordon Myers**

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This is a (Check one) **Party Committee** **PAC**

This is an (Check one) **Initial Appointment** **Amended Statement**

Committee Name: **Atchison County Democratic Party**
Address: **1301 Holiday Dr**
Address2:
City: **Atchison** State: **KS** Zip: **66002**
Business Phone: **(913) 426-0564**
Email Address: **ryanpickman@gmail.com**

Chairperson Name: **Ryan Pickman**
Address: **1301 Holiday Dr**
Address2:
City: **Atchison** State: **KS** Zip: **66002**
Home Telephone: Business Phone: **(913) 426-0564**
Email Address: **ryanpickman@gmail.com**

Treasurer Name: **Gordon Myers**
Address: **1507 Fairway Dr**
Address2:
City: **Achison** State: **KS** Zip: **66002**
Home Telephone: Business Phone: **(913) 426-5450**
Email Address: **gordondmyers@yahoo.com**

Affiliated or Connected Organizations Name: **none**
Address:
Address2:
City: State: Zip:

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

no affiliated organizations

I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **1/4/2022 12:13:54 PM** Signature of Chairperson: **Ryan Pickman**

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STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

FILED

DEC 10 2018

KRIS W. KOBACH
SECRETARY OF STATE

(See Reverse Side For Instructions)

This is a (check one) Party Committee Political Action Committee
 This is an (check one) Initial Statement Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name *Atchison County Democratic Commi Hee*

Mailing Address (Street, City, State, Zip Code) *1247 LINCOLN Rd, Cummings, Ks 66016* Business Telephone *(913) 886-3255*

CHAIRPERSON

Name *Karen Bell* Home Telephone *(913) 370-0085*

Mailing Address (Street, City, State, Zip Code) *12063 Pawnee Rd, Atchison, Ks 66002* Business Telephone *()*

TREASURER

Name *Pauline M. Lee* Home Telephone *(913) 886-3255*

Mailing Address (Street, City, State, Zip Code) *1247 LINCOLN Rd, Cummings, Ks 66016* Business Telephone *()*

AFFILIATED OR CONNECTED ORGANIZATIONS

Name *Kansas Democratic Party*

Mailing Address (Street, City, State, Zip Code) *Topeka Ks.*

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

SIGNATURE:

"I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

12-6-18
(Date)

Karen Bell
(Signature of Chairperson)