STATEMENT OF ORGANIZATION

FILED

111N 2 A 2016

FOR POLITICAL ACTION COMMITTEES AND PARTY COM	IMITTEES 2018
(See Reverse Side For Instructions)	KRIS W. KOBACH SECRETARY OF STATE
This is an (check one) Party Committee Political Action Committee This is an (check one) Initial Statement Amended Statement	
COMMITTEE (PLEASE TYPE OR PRINT)	
Name Dans Too dans MAC	
Mailing Address (Street, City, State, Zip Code) 715 SW 10th Ave Topeka KS 66612-1686 785 232-8	27[
CHAIRPERSON	
Name Danie / Hoassen Home Telephone (316) 772-8	457
Mailing Address (Street, City, State, Zip Code) 715 SW 10 th Ave Topeka K5 66612-1686 (785) 232-8	
TREASURER	
Name Home Telephone (785) 672	0903
Mailing Address (Street, City, State, Zip Code) Business Telephone 715 SW 10 th Ave Topeka K5 66612-1686 (785) 232-8	
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name Same as Above	
Mailing Address (Street, City, State, Zip Code)	
If not connected or affiliated with an organization, identify the trade, profession, or primary interes	at 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 is a class A misdemeanor." 6/13/16	
Governmental Ethics Commission	Rev.2000

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

·		(See Reverse Side For	Instructions)	RECEIVED
	This is a (check one)	Party Committee	Political Action Committee	
	This is an (check one)	Initial Statement	Amended Statement	JUN 29 2015
'			r > 0	overnmental Ethics Com
COMMITTEE		(PLEASE TYPE OF	R PRINT)	
Name Konza	Teachers PAC			
	ss (Street, City, State,		Business Telephone	
715 SW 10th	h Ave Topeka KS	66612-1686	(785) 232-8271	
CHAIRPERSO	ON			
Name	n Klaassen		Home Telephone	
		7. (. 1.)		
	ss (Street, City, State, n Ave Topeka KS 6		Business Telephone (785) 232-8271	
	·			
TREASURER				
Name	Magazan		Home Telephone	
	N Klaassen ss (Street, City, State,	Zin Code)	Business Telephone	
715 SW 10	th Ave Topeka KS	66612-1686	(785) 232- 82	71
AEEH IATED	OR CONNECTED O	DCANIZATIONS		
Name _	OR CONNECTED O	RUANIZATIONS		
Same	as Above			
Mailing Addre	ss (Street, City, State,	Zip Code)		
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	or annatod with an org			
SIGNATURE:				
		examined by me and	to the best of my knowledge and	1
	<u>-</u>		tentional failure to file this docu	ment
or intentionally	filing a false document	nt is a class A misdeme	eanor."	
6/13/19	5	Mean	ure of Chairperson)	_
(Date)		(Signat	ure of Chairperson)	
Governmental E	Ethics Commission			Rev.2000