

## STATEMENT OF ORGANIZATION

### FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input checked="" type="checkbox"/> Party Committee	<input type="checkbox"/> Political Action Committee
This is an (check one)	<input checked="" type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

#### COMMITTEE

(PLEASE TYPE OR PRINT)

Name **Kansas 2nd Congressional District Democratic Committee**

Mailing Address (Street, City, State, Zip Code)  
**3741 SW Kings Forest Rd, Topeka, KS 66610**

Business Telephone  
( )

#### CHAIRPERSON

Name  
**Marcus Williamson**

Home Telephone  
( 785 ) 380-8791

Mailing Address (Street, City, State, Zip Code)  
**1322 E 21st St, Lawrence, KS 66046**

Business Telephone  
( )

#### TREASURER

Name  
**Ty Dragoo**

Home Telephone  
( 785 ) 817-9607

Mailing Address (Street, City, State, Zip Code)  
**3741 SW Kings Forest Rd, Topeka, KS 66610**

Business Telephone  
( )

#### AFFILIATED OR CONNECTED ORGANIZATIONS

Name  
**Kansas Democratic Party**


Mailing Address (Street, City, State, Zip Code)  
**PO Box 1914, Topeka, KS 66601**

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."

**June 20, 2017**  
(Date)

  
(Signature of Chairperson)

[Print this form](#) or [Go Back](#)



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

Governmental Ethics Commission  
109 W. 9th, Suite 504  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
[www.kansas.gov/ethics](http://www.kansas.gov/ethics)

This is a (Check one) ☒ Party Committee ☐ PAC

This is an (Check one) ☒ Initial Appointment ☐ Amended Statement

**Committee** Name: **Kansas 2nd Congressional Democrats**

Address: **3741 SW Kings Forest Rd**

Address2:

City: **Topeka** State: **KS** Zip: **66610**

Business Phone:

Email Address: **ty@smartks.org**

**Chairperson** Name: **Linda Suefert**

Address: **17291 182nd St**

Address2:

City: **Tonganoxie** State: **KS** Zip: **66086**

Home Telephone: Business Phone:

Email Address: **ljseufert@gmail.com**

**Treasurer** Name: **Ty Dragoo**

Address: **3741 SW Kings Forest Rd**

Address2:

City: **Topeka** State: **KS** Zip: **66610**

Home Telephone: Business Phone:

Email Address: **ty@smartks.org**

**Affiliated or Connected Organizations** Name: **Kansas Democratic Party**

Address: **PO Box 1914**

Address2:

City: **Topeka** State: **KS** Zip: **66601**

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

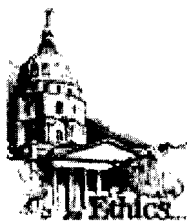
**I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.**

Executed on:

Date: **7/14/2016 11:35:57 AM** Signature of Chairperson: **Linda Suefert**

[Print this form](#) or [Go Back](#)

[Print this form](#) or [Go Back](#)



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

Governmental Ethics Commission  
109 W. 9th, Suite 504  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
[www.kansas.gov/ethics](http://www.kansas.gov/ethics)

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

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

**Committee** Name: **KS Democratic 2nd Congressional Dist. Committee**

Address: **17291 182nd**

Address2:

City: **Tonganoxie** State: **KS** Zip: **66086**

Business Phone:

Email Address:

**Chairperson** Name: **Linda Seufert**

Address: **17291 182nd**

Address2:

City: **Tonganoxie** State: **KS** Zip: **66086**

Home Telephone: **(913) 369-2980** Business Phone:

Email Address: **ljseufert@netscape.net**

**Treasurer** Name: **Ty Dragoo**

Address: **3741 SW Kingsforrest Rd.**

Address2:

City: **Topeka** State: **KS** Zip: **66610**

Home Telephone: **(785) 817-9607** Business Phone:

Email Address: **ty@smartks.org**

**Affiliated or** Name: **KS Democratic Party**

**Connected** Address: **700 SW Jackson**

**Organizations** Address2:

City: **Topeka** State: **KS** Zip: **66603**

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

**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: **8/27/2015 3:21:51 PM** Signature of Chairperson: **Linda Seufert**

[Print this form](#) or [Go Back](#)