

# STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

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

RECEIVED  
MAR 12 2020  
Kansas Governmental Ethics Commission

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Kansas Democratic LGBT Caucus	
Mailing Address (Street, City, State, Zip Code)	Business Telephone	
800 N Market St, Wichita, KS 67214	( 316 )	683-1706

CHAIRPERSON

Name	Home Telephone
Sandra Stenzel	( )
Mailing Address (Street, City, State, Zip Code)	Business Telephone
800 N Market St, Wichita, KS 67214	( )

TREASURER

Name	Home Telephone
Caleb Deines	( 785 ) 410-1282
Mailing Address (Street, City, State, Zip Code)	Business Telephone
1301 W 24th St, Apt. C-9, Lawrence, KS 66046	( )

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."

3/9/2020  
(Date)

Sandra Stenzel  
(Signature of Chairperson)

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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: **Kansas Democratic LGBT Caucus**

Address: **119 SE 14th St**

Address2: **PO Pox 13**

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

Business Phone: **(785) 215-7436**

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

**Chairperson** Name: **Stephanie Mott**

Address: **119 SE 14th St**

Address2: **PO Box 13**

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

Home Telephone: **(785) 215-7436** Business Phone: **(785) 215-7436**

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

**Treasurer** Name: **Sarah Bailey**

Address: **65A King St**

Address2:

City: **Burlington** State: **VT** Zip: **5401**

Home Telephone: **(802) 495-1211** Business Phone:

Email Address: **sebailey2@gmail.com**

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

Address: **PO Box 1914**

Address2: **PO Box 13**

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: **8/23/2018 8:36:09 PM** Signature of Chairperson: **Stephanie Mott**

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