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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 Third Congressional District Democratic Committee**

Address: **5000 State Ave**

Address2:

City: **Kansas City** State: **KS** Zip: **66102**

Business Phone: **(913) 671-9000**

Email Address: **hank@alliedglassexperts.com**

Chairperson Name: **Lauren Martin**

Address: **8411 Somerset Dr**

Address2:

City: **Prairie Village** State: **KS** Zip: **66207**

Home Telephone: **(913) 961-6135** Business Phone:

Email Address: **lnmartin08@gmail.com**

Treasurer Name: **Hank Chamberlain**

Address: **5000 State Avenue**

Address2:

City: **Kansas City** State: **KS** Zip: **66102**

Home Telephone: **(913) 671-9000** Business Phone: **(913) 671-9000**

Email Address: **hank@alliedglassexperts.com**

Affiliated or Name: **Kansas Democratic Party**

Connected Address: **501 SE Jefferson, Ste 30**

Organizations Address2:

City: **Topeka** State: **KS** Zip: **66607**

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: **2/3/2021 1:42:44 PM** Signature of Chairperson: **Lauren N. Martin**

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Address: **5000 State Avenue**

Address2:

City: **Kansas City** State: **KS** Zip: **66102**

Business Phone: **(913) 671-9000**

Email Address: **hank@alliedglassexperts.com**

Chairperson Name: **Alyce Edwards**

Address: **10326 Parkview Ave.**

Address2:

City: **Kansas City** State: **KS** Zip: **66109-3761**

Home Telephone: **(913) 788-8916** Business Phone:

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

Treasurer Name: **Henry Chamberlain**

Address: **5000 State Avenue**

Address2:

City: **Kansas City** State: **KS** Zip: **66102**

Home Telephone: **(913) 671-9000** Business Phone: **(913) 671-9000**

Email Address: **hank@alliedglassexperts.com**

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

Address: **501 SE Jefferson, Ste. 30**

Address2:

City: **Topeka** State: **KS** Zip: **66607**

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Executed on:

Date: **1/2/2020 11:24:22 AM** Signature of Chairperson: **Alyce Edwards, by HHC**

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

Committee Name: **Kansas Third Congressional District Democrats**

Address: **5000 State Avenue**

Address2:

City: **Kansas City** State: **KS** Zip: **66102**

Business Phone: **(913) 287-9200**

Email Address: **hank@alliedglassexperts.com**

Chairperson Name: **Alyce Edwards**

Address: **10326 Parkview Ave.**

Address2:

City: **Kansas City** State: **KS** Zip: **66109-3761**

Home Telephone: **(913) 788-8916** Business Phone:

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

Treasurer Name: **Henry Chamberlain**

Address: **5000 STATE AVENUE**

Address2:

City: **KANSAS CITY** State: **KS** Zip: **66102**

Home Telephone: **(913) 671-9000** Business Phone: **(913) 287-9200**

Email Address: **hank@alliedglassexperts.com**

Affiliated or Name: **Kansas Democratic Party**

Connected Address: **PO Box 1914**

Organizations

Address2:

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

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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: **7/18/2019 3:38:51 PM** Signature of Chairperson: **Alyce Edwards**

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