

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

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JAN 10 2022

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|------------------------|--|--|
| 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 type="checkbox"/> Amended Statement |

KS Governmental Ethics Commission

COMMITTEE (PLEASE TYPE OR PRINT)

Name KANSAS CITY REALTORS PAC

Mailing Address (Street, City, State, Zip Code) Business Telephone
 11150 OVERBROOK RD., SUITE 100, LEAWOOD, KS 662 (913) 661-1600

CHAIRPERSON

Name Home Telephone
 KATHLEEN MINDEN (913) 238-1662

Mailing Address (Street, City, State, Zip Code) Business Telephone
 1150 OVERBROOK RD., SUITE 100, LEAWOOD, KS 662 (913) 587-4700

TREASURER

Name Home Telephone
 JOHN J. CARSON (816) 225-6880

Mailing Address (Street, City, State, Zip Code) Business Telephone
 1150 OVERBROOK RD., SUITE 100, LEAWOOD, KS 662 (913) 661-1600

AFFILIATED OR CONNECTED ORGANIZATIONS

Name KANSAS CITY REGIONAL ASSOCIATION OF REALTORS - KANSAS REALTORS POLITI

Mailing Address (Street, City, State, Zip Code)
 11150 OVERBROOK RD., SUITE 100, LEAWOOD, KS 66211

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

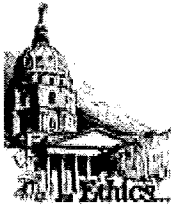
SIGNATURE:

"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."

1-10-22
(Date)


(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 City REALTORS PAC**
Address: **11150 Overbrook Rd**
Address2: **Suite 100**
City: **Leawood** State: **KS** Zip: **66211**
Business Phone: **(913) 661-1600**
Email Address: **nancyd@kcrar.com**

Chairperson Name: **Kathleen Minden**
Address: **11150 Overbrook Rd**
Address2: **Suite 100**
City: **Leawood** State: **KS** Zip: **66211**
Home Telephone: **(913) 238-1662** Business Phone: **(913) 661-1600**
Email Address: **nancyd@kcrar.com**

Treasurer Name: **John J. Carson**
Address: **11150 Overbrook Rd**
Address2: **Suite 100**
City: **Leawood** State: **KS** Zip: **66211**
Home Telephone: **(816) 225-6880** Business Phone: **(913) 661-1600**
Email Address: **jeffc@kcrar.com**

Affiliated or Connected Organizations Name: **Kansas City Regional Association of REALTORS**
Address: **11150 Overbrook Rd**
Address2: **Suite 100**
City: **Leawood** State: **KS** Zip: **66211**

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: **4/14/2020 2:59:13 PM** Signature of Chairperson: **Kathleen Minden**

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