

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

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Governmental Ethics Commission

(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 checked="" type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Kansas Pet Protection PAC	
------	---------------------------	--

Mailing Address (Street, City, State, Zip Code)	Business Telephone
11460 Tomahawk Creek Parkway, Suite 300 Leawood, KS 66211	(816) 237-3001

CHAIRPERSON

Name	Home Telephone
Charles Laue	()

Mailing Address (Street, City, State, Zip Code)	Business Telephone
11460 Tomahawk Creek Parkway, Suite 300 Leawood, KS 66211	(816) 237-3001

TREASURER

Name	Home Telephone
Kathy Lowery	()

Mailing Address (Street, City, State, Zip Code)	Business Telephone
11460 Tomahawk Creek Parkway, Suite 300 Leawood, KS 66211	(816) 237-3114

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	Kansas Pet Protection Coalition
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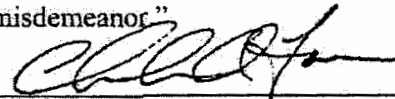
Mailing Address (Street, City, State, Zip Code)	11460 Tomahawk Creek Parkway, Suite 300, Leawood, KS 66211
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If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

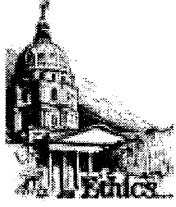
SIGNATURE:

"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."

8/9/2022
(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: **Stray Dog PAC of Kansas**
Address: **11460 Tomahawk Creek Parkway**
Address2: **Suite 300**
City: **Leawood** State: **KS** Zip: **66211**
Business Phone:
Email Address: **kathy@stray.dog**

Chairperson Name: **Charles Laue**
Address: **11460 Tomahawk Creek Parkway**
Address2:
City: **Leawood** State: **KS** Zip: **66211**
Home Telephone: Business Phone:
Email Address: **kathy@stray.dog**

Treasurer Name: **Kathy Lowery**
Address: **11460 Tomahawk Creek Parkway**
Address2: **Suite 300**
City: **Leawood** State: **KS** Zip: **66211**
Home Telephone: Business Phone:
Email Address: **kathy@stray.dog**

**Affiliated or
Connected
Organizations** Name: **Stray Dog Policy, Inc.**
Address: **11460 Tomahawk Creek Parkway**
Address2: **Suite 300**
City: **Leawood** State: **KS** Zip: **66211**

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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: **12/9/2021 4:10:30 PM** Signature of Chairperson: **Chuck Laue**

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This is a (Check one) Party Committee PAC

This is an (Check one) Initial Appointment Amended Statement

Committee Name: **Stray Dog PAC of Kansas**
Address: **11460 Tomahawk Creek Parkway, Suite 300**
Address2:
City: **Leawood** State: **KS** Zip: **66211**
Business Phone: **(913) 754-5440**
Email Address: **cbarnett@kwm-law.com**

Chairperson Name: **Charles A. Laue**
Address: **11460 Tomahawk Creek Parkway, Suite 300**
Address2:
City: **Leawood** State: **KS** Zip: **66211**
Home Telephone: Business Phone:
Email Address: **cbarnett@kwm-law.com**

Treasurer Name: **Miranda Pratt**
Address: **11460 Tomahawk Creek Parkway, Suite 300**
Address2:
City: **Leawood** State: **KS** Zip: **66211**
Home Telephone: Business Phone:
Email Address: **miranda@straydogpolicy.org**

Affiliated or Connected Organizations Name: **Stray Dog Policy, Inc.**
Address: **11460 Tomahawk Creek Parkway, Suite 300**
Address2:
City: **Leawood** State: **KS** Zip: **66211**

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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: **2/24/2021 12:23:32 PM** Signature of Chairperson: **Charles A. Laue**

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