

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)

☐

Party Committee

☒

Political Action Committee

This is an (check one)

☒

Initial Statement

☐

Amended Statement

RECEIVED

AUG 02 2021

KS Governmental Ethics Commission

COMMITTEE

(PLEASE TYPE OR PRINT)

Name

AAWVA PAC

Mailing Address (Street, City, State, Zip Code)

Business Telephone

P.O. Box 5437, Topeka, KS 66605 (785) 217.3888

CHAIRPERSON

Name

Christine Smith

Home Telephone

(785) 217.3888

Mailing Address (Street, City, State, Zip Code)

Business Telephone

P.O. Box 5437, Topeka, KS 66605 ()

TREASURER

Name

Timothy Smith

Home Telephone

(816) 499.5835

Mailing Address (Street, City, State, Zip Code)

Business Telephone

P.O. Box 5437, Topeka, KS 66605 ()

AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Mailing Address (Street, City, State, Zip Code)

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."

(Date)

(Signature of Chairperson)