STATEMENT OF ORGANIZATION FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES (See Reverse Side For Instructions) This is a (check one) Party Committee Political Action Committees This is an (check one) Initial Statement Amended Statement COMMITTEE (PLEASE TYPE OR PRINT) Name Kansans for Choice Mailing Address (Street, City, State, Zip Code) **Business Telephone** 123 E Minneapolis St, Salina, KS 67401 (785) 577-4233 **CHAIRPERSON** Name Home Telephone Ryan Holmquist 785) 577-4233 Mailing Address (Street, City, State, Zip Code) **Business Telephone** 123 E Minneapolis St., Salina, KS 67401 TREASURER Name Home Telephone Ryan Holmquist Mailing Address (Street, City, State, Zip Code) 123 E Minneapolis St., Salina, KS 67401 Business Telephone 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."

4/25/24 (Date)

(Signature of Chairperson)

Governmental Ethics Commission