

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED
JUL 30 2020
KS 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 type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name	<i>Shawnee County Democratic Legislative Committee</i>	
Mailing Address (Street, City, State, Zip Code)	<i>66614</i>	Business Telephone
<i>2721 SW Arrowhead Rd., Topeka, KS</i>	()	()

CHAIRPERSON

Name	<i>Anthony Hensley</i>	Home Telephone
		<i>(785) 267-3300</i>
Mailing Address (Street, City, State, Zip Code)	<i>4240 SE Wisconsin Ave., Topeka, KS 66609</i>	Business Telephone
		()

TREASURER

Name	<i>Jim Ploger</i>	Home Telephone
		<i>(785) 383-2557</i>
Mailing Address (Street, City, State, Zip Code)	<i>2721 SW Arrowhead Rd., Topeka, KS 66614</i>	Business Telephone
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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.

Interest in electing Democrats to the Kansas Legislature.

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."

7/27/20
(Date)

Anthony Hensley
(Signature of Chairperson)