

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED

(See Reverse Side For Instructions)

JAN 10 2022

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

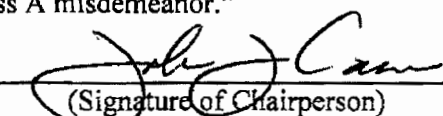
Mailing Address (Street, City, State, Zip Code)  
 11150 OVERBROOK RD., SUITE 100, LEAWOOD, KS 66211

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)