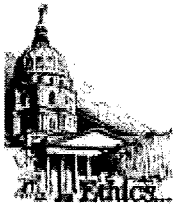


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**Campaign Finance
Statement of Organization
For Political Action Committees
And Party Committees**

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: **Sedgwick County Democratic Central Committee**

Address: **PO Box 49323**

Address2:

City: **Wichita** State: **KS** Zip: **67202**

Business Phone:

Email Address: **info@sedgwickcountydems.org**

Chairperson Name: **JOSEPH SHEPARD**

Address: **5412 E MORRIS ST**

Address2:

City: **WICHITA** State: **KS** Zip: **67218**

Home Telephone: **(316) 226-0974** Business Phone:

Email Address: **Jwshepard1906@gmail.com**

Treasurer Name: **REBECCA JENEK**

Address: **5520 W 37TH ST S**

Address2:

City: **WICHITA** State: **KS** Zip: **67215**

Home Telephone: **(316) 619-5370** Business Phone:

Email Address: **BECKS02@AOL.COM**

Affiliated or Name: **Kansas Democratic Party**

Connected Address: **501 SE Jefferson St**

Organizations Address2: **Suite 30**

City: **Topeka** State: **KS** Zip: **66607**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

PARTY AFFILIATION

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: **8/31/2020 3:26:05 AM** Signature of Chairperson: **JOSEPH SHEPARD**

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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: **Sedgwick County Democratic Central Committee**

Address: **111 S. Hydraulic**

Address2:

City: **Wichita** State: **KS** Zip: **67211**

Business Phone: **(316) 262-7534**

Email Address: **info@sedgwickcountydems.org**

Chairperson Name: **Jimmy Yeager**

Address: **111 S. Hydraulic**

Address2:

City: **Wichita** State: **KS** Zip: **67211**

Home Telephone: **(316) 259-4350** Business Phone: **(316) 262-7534**

Email Address: **info@sedgwickcountydems.org**

Treasurer Name: **Esau Freeman**

Address: **111 S. Hydraulic**

Address2:

City: **Wichita** State: **KS** Zip: **67211**

Home Telephone: **(316) 737-5911** Business Phone: **(316) 253-0712**

Email Address: **esau@cox.net**

Affiliated or Name: **Kansas Democratic Party**

Connected Address: **501 SE Jefferson St**

Organizations Address2: **Suite 30**

City: **Topeka** State: **KS** Zip: **66607**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

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: **2/13/2019 7:52:03 PM** Signature of Chairperson: **Jimmy Allen Yeager**

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