STATEMENT OF ORGANIZATION

| FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES |
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| (See Reverse Side For Instructions) |
| This is a (sheek and) AR 2 8 2023 |
| This is an (check one) Initial Statement Amended Statement Political Action Committee KS Governm Ential Ethics Commission |
| |
| COMMITTEE (PLEASE TYPE OR PRINT) Name |
| Shawnee County Democratic Party |
| Mailing Address (Street, City, State, Zip Code) Business Telephone Po Box 2434 Topeka KS 6660 (785) 272 2644 |
| CHAIRPERSON |
| Name Keith Tatum Home Telephone 250-5927 (785) 207-1368 |
| Mailing Address (Street, City, State, Zip Code) Business Telephone 3 306 SW Belle Ard Topeka KS (666) () |
| TREASURER |
| Name Karen Rooney-Chevas Home Telephone (785) 554-3193 |
| Mailing Address (Street, City, State, Zip Code) H 22 Su) Land St Topeka KS 66606 () |
| AFFILIATED OR CONNECTED ORGANIZATIONS |
| Name Kansas Democratic Party |
| Mailing Address (Street, City, State, Zip Code) PO Box 1914 Topeka KS (2660) |
| 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." |
| (Signature of Chairperson) |
| Governmental Ethics Commission Rev.2000 |