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

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is a (Check one) **Party Committee** **PAC**

This is an (Check one) **Initial Appointment** **Amended Statement**

CommitteeName: **Kansans for a Democratic House**Address: **PO Box 2083**

Address2:

City: **Top** State: **KS** Zip: **66601-2083**Business Phone: **(785) 296-5623**Email Address: **info@kshousedems.com****Chairperson**Name: **Paul Davis**Address: **1731 Indiana**

Address2:

City: **Lawrence** State: **KS** Zip: **66044**Home Telephone: **(785) 550-1334** Business Phone: **(785) 331-0300**Email Address: **paul.davis@kshousedems.com****Treasurer**Name: **Annie Tietze**Address: **329 SW Yorkshire Road**

Address2:

City: **Topeka** State: **KS** Zip: **66606**Home Telephone: **(785) 273-5296** Business Phone:Email Address: **atietze@cox.net****Affiliated or Connected
Organizations**Name: **Democractic House Campaign Committee**Address: **PO Box 2083**

Address2:

City: **Topeka** State: **KS** Zip: **66601-2083**

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: **12/28/2011 4:16:10 PM** Signature of Chairperson: **Paul Davis**[Print this form](#) or [Go Back](#)

STATEMENT OF ORGANIZATION

RECEIVED

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

JUN 13 2011

KS Governmental Ethics Commission

(See Reverse Side For Instructions)

This is a (check one)	<input checked="" type="checkbox"/> Party Committee	<input 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	Kansans for A Democratic House	
Mailing Address (Street, City, State, Zip Code)	P.O. Box 2083 Topeka, KS 66601	
Business Telephone	(785) 296-5623	

CHAIRPERSON

Name	Paul Davis	Home Telephone	(785) 749-1942
Mailing Address (Street, City, State, Zip Code)	1731 Indiana St Lawrence, KS 66044		
Business Telephone	(785) 296-7630		

TREASURER

Name	Dustin Hardison	Home Telephone	(785) 213-6539
Mailing Address (Street, City, State, Zip Code)	3137 Meadow Lane Topeka, KS 66614		
Business Telephone	(785) 296-5623		

AFFILIATED OR CONNECTED ORGANIZATIONS

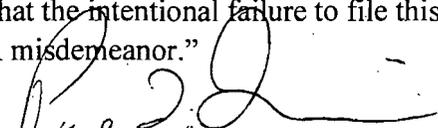
Name	Kansas House Democrats		
Mailing Address (Street, City, State, Zip Code)	P.O. Box 2083 Topeka, KS 66601		

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."

6/9/11
(Date)


(Signature of Chairperson)