

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

MAR 14 2017

(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 Kansas Democratic Party	
Mailing Address (Street, City, State, Zip Code) P.O. Box 1914, Topeka, KS, 66601	Business Telephone ( 785 ) 234-0425

CHAIRPERSON

Name John Gibson	Home Telephone ( 785 ) 224-1815
Mailing Address (Street, City, State, Zip Code) 3675 Pawnee Rd, Perry, KS, 66073	Business Telephone ( )

TREASURER

Name Bill Hutton	Home Telephone ( 913 ) 219-3656
Mailing Address (Street, City, State, Zip Code) 13939 Parallel, Kansas City, KS, 66007	Business Telephone ( )

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.

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."

03/10/2017  
(Date)

*John E. Gil*  
(Signature of Chairperson)

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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](http://www.kansas.gov/ethics)

This is a (Check one)  Party Committee  PAC

This is an (Check one)  Initial Appointment  Amended Statement

**Committee** Name: **Kansas Democratic Party**  
Address: **PO Box 1914**  
Address2:  
City: **Topeka** State: **KS** Zip: **66601**  
Business Phone: **(785) 234-0425**  
Email Address: **info@kansasdems.org**

**Chairperson** Name: **Lee Kinch**  
Address: **345 Riverview Street**  
Address2: **#700**  
City: **Wichita** State: **KS** Zip: **67203**  
Home Telephone: Business Phone: **(316) 265-3366**  
Email Address: **lee@kansasdems.org**

**Treasurer** Name: **Joan Wagnon**  
Address: **PO Box 8303**  
Address2:  
City: **Topeka** State: **KS** Zip: **66608**  
Home Telephone: Business Phone: **(785) 380-4160**  
Email Address: **joan@kansasdems.org**

**Affiliated or Connected Organizations** Name: **Democratic Party**  
Address: **430 South Capitol Street Southeast**  
Address2:  
City: **Washington** State: **DC** Zip: **20003**

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**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: **7/20/2016 9:24:14 AM** Signature of Chairperson: **Lee Kinch**

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## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(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	Kansas Democratic Party	
Mailing Address (Street, City, State, Zip Code)	700 SW Jackson Street #404, Topeka KS 66603	Business Telephone ( 785 ) 234-0425

### CHAIRPERSON

Name	Lee Kinch	Home Telephone ( )
Mailing Address (Street, City, State, Zip Code)	601 S Honeybrook Ln Derby, KS 67307	Business Telephone ( 316 ) 265-3366

### TREASURER

Name	Tobias Schlingensiepen	Home Telephone ( )
Mailing Address (Street, City, State, Zip Code)	700 Sw Jackson St #404 Topeka, KS 66603	Business Telephone ( 785 ) 234-0425

### AFFILIATED OR CONNECTED ORGANIZATIONS

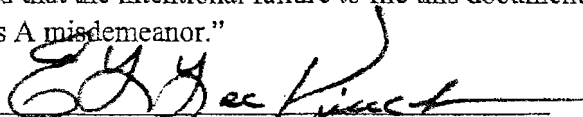
Name	
Mailing Address (Street, City, State, Zip Code)	

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### 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."

Oct. 6, 2015  
(Date)

  
(Signature of Chairperson)