STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

		(See Reverse Sid	le For Instru	ctions)	MAR 142017	
	This is a (check one)	✔ Party Comm	nittee	Political Action Committee	e se	
	This is an (check one)	Initial State	ment 🗸	Amended Statement		
COMMITTEE	3	(PLEASE TY	PE OR PRI	NT)		
Name Demo	cratic Tallgrass Con	nmittee				
Mailing Address (Street, City, State, Zip Code) P.O. Box 1914, Topeka, KS, 66601				Business Telephone (785) 234-0425		
CHAIRPERSO	ON					
Name John (Gibson			Home Telephone (785) 224-1815		
	ess (Street, City, State, ee Rd, Perry, KS, 66			Business Telephone		
TREASURER						
Name Bill Hu	itton			Home Telephone (913) 219-3656	6	
Mailing Addre 13939 Para	ess (Street, City, State, allel, Kansas City, K	Zip Code) S, 66007		Business Telephone	_	
AFFILIATED	OR CONNECTED O	RGANIZATION	S			
Name		-		-	- 1	
Mailing Addre	ess (Street, City, State,	Zip Code)	-	***	J	
If not connected	or affiliated with an org	anization, identify	the trade, pr	ofession, or primary interest	of the contributors.	
			-			
belief is true, co	this statement has been	understand that nt is a class A mi	the intention sdemeanor.	best of my knowledge and halfailure to file this document, Chairperson)		
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STATEMENT OF ORGANIZATION

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FOR POLITICAL ACTION COMMITTEES AND PARTIE COMMINICAL	EESmmiss						
(See Reverse Side For Instructions)							
This is a (check one) Party Committee Political Action Committee							
This is an (check one) Initial Statement Amended Statement							
COMMITTEE (PLEASE TYPE OR PRINT)							
Name Democratre Tallows Com: Hee							
Mailing Address (Street, City, State, Zip Code) Business Telephone PD Box 1914 Topoka, KS 66601 (785) 234-042	5						
CHAIRPERSON							
Name Home Telephone ()							
Mailing Address (Street, City, State, Zip Code) Business Telephone 345 Kiverview X#700 Wichita, KS 67203 (716) 265-3366							
TREASURER							
Name Home Telephone							
Mailing Address (Street, City, State, Zip Code) Business Telephone (785) 380-4160							
AFFILIATED OR CONNECTED ORGANIZATIONS							
Name A. R.							
Mailing Address (Street, City, State, Zip Code)							
PO Box 1914 Topoka, KS 66601							
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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."							
(Date) (Date) (Date)							
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STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)								
	This is a (check one)	✓ Party Committee	Political Action Con	nnittee				
	This is an (check one)	Initial Statement	Amended Statemen	t				
								
T	COMMITTEE (PLEASE TYPE OR PRINT)							
Name Democratic Tallgrass Committee								
	ss (Street, City, State, kson Street #404, T		Business Telephone (785) 234-0425					
CHAIRPERSO	ON							
Name Lee Ki	nch		Home Telepho	one				
Mailing Addre	ss (Street, City, State, ybrook Ln Derby, KS	Zip Code) 5 67307	Business Tele (316) 26	phone 5-3366				
TREASURER								
Name Tobias	Schlingensiepen		Home Telepho ()	one				
Mailing Addre 700 Sw Jac	ss (Street, City, State, ckson St #404 Tope	Zip Code) ka, KS 66603	Business Tele (785) 2	ephone 34-0425				
AFFILIATED	OR CONNECTED O	RGANIZATIONS						
Name Kansa	s Democratic Party							
Mailing Address (Street, City, State, Zip Code) 700 SW Jackson St #404 Topeka, KS 66603								
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SIGNATURE:								
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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."								
Det 1. 2615 Ex Due Rinch								
(Date)		(Signati	rre of Chairperson)					

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