STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)							
	This is a (check one)	✓ Party Committee	Political Action Committee				
	This is an (check one)	Initial Statement	✓ Amended Statement	RECEIVED			
		(DIELCE TYPE OF	D DDYNIT!\	APR - 1 2021			
COMMITTEE (PLEASE TYPE OR PRINT)							
Name Democratic Legislative Victory Fund - 3rd District KS Governmental Ethics Comms							
	ss (Street, City, State, 4 Topeka, KS 6660		Business Telephone (785) 234 0425				
CHAIRPERSO)N						
Name Vicki H	liatt		Home Telephone (913) 422 1952				
	ss (Street, City, State, nd St Shawnee, KS		Business Telephone				
TREASURER							
Name	la Taylor		Home Telephone (785) 608 3291				
	la Taylor ss (Street, City, State,	Zin Code)	Business Telephone				
2021 SW A	twood Ave Topeka,	KS 66604	()				
AFFILIATED	OR CONNECTED O	RGANIZATIONS		\			
Name				,			
Mailing Addres	ss (Street, City, State,	Zip Code)					
If not connected o	or affiliated with an org	anization, identify the tra	nde, profession, or primary interest	of the contributors.			
SIGNATURE:							
		:3	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."							
3/31/2021	ming a raise documer	it is a class A musueme	anor." DocuSigned by:				
(Date)		(Signati	ure of Chairperson)	_			
Governmental E	thics Commission			Rev.2000			

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	This is an (check one)	Initial Statement	✓ Amended Statement				
'							
COMMITTEE (PLEASE TYPE OR PRINT)							
Name Democratic Legislative Victory Fund - 3rd District							
Mailing Address (Street, City, State, Zip Code) PO Box 1914 Topeka, KS 66601			Business Telephone (785) 234-0425				
CHAIRPERSO	ON						
Name Vicki H	liatt		Home Telephone (913) 422-1952				
Mailing Addre 21522 W 72							
TREASURER							
Name			Home Telephone				
Gina L			(785) 259-9003				
Mailing Addre 1302 N Wa	ss (Street, City, State, Inut, Hutchinson, K	Zip Code) S, 67501	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." 3-/2-20/9							
, ,	Ethics Commission			Rev.2000			
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