Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Reddy For Kansas PO BOX 15804 ADDRESS (number and street) (Check if address is changed) Lenexa 66285 KS CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address monet@reddyforkansas.com is changed) Optional Second E-Mail Address monet@reddyforkansas.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00845347 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Straub, Monet, Nicole, Straub, Monet, Nicole, , Date 03 27 2025 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
Name of Candidate Reddy, Prasanth, , Dr.,	
Candidate Party Affiliation REP Office Sought: House Senate President	State KS District 03
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District 00
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republica	itic, in, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	cted organization is a:
Corporation Corporation w/o Capital Stock Labor	Organization
Membership Organization Trade Association Coope	_
In addition, this committee is a Lobbyist/Registrant PAC.	
This committee supports/opposes more than one Federal candidate, and is NOT a separate segrega committee. (i.e., nonconnected committee)	ted fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid	PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Committees Participating in Joint Fundraiser	
1 C	

	FEC Form 1 (Revised 02	2/2009)	Page 3
W	Vrite or Type Committee Name		
	Reddy For Kansa	as	
6.	•	ganization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
	GROW THE MAJOR	ITY 	
	Mailing Address	228 S WASHINGTON ST STE 115	
		1	
		ALEXANDRIA VA :	22314
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
	Connected	Annual Organization Out Fundaming Representative	Leadership FAC Sporiso
7.	Custodian of Records: Identiful books and records.	fy by name, address (phone number optional) and position of the person in p	ossession of committee
	Straub, Mor	net, Nicole, ,	
		23510 W 72nd Terrace	
	Mailing Address		
		Shawnee KS C	66227
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	SIAIE	ZIP CODE A
	Treasurer	913	787 6593
		Telephone number	
8.	Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and ssistant treasurer).	the name and address of
		net, Nicole, ,	ı
	of Treasurer	00540 W 704 J 7444 -	
	Mailing Address	23510 W 72nd Terrace	
		Shawnee	66227
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
		913 	

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Full Name of Designated Agent	Straub, Monet, Nicole, ,		
Mailing Address	23510 W 72nd Terrace		
		110	
	Shawnee	Ks	66227
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
	Telephon	e number	
. Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the corxes or maintains funds.	mmittee deposits fur	nds, holds accounts, rents
Name of Bank, D	Depository, etc.		
	Silver Lake Bank		
Mailing Address	7206 College Blvd		
	Overland Park	KS	66210
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.		
	Chain Bridge Bank		
Mailing Address	1445-A Laughlin Ave.		
	McLean	VA	22101
	CITY ▲	STATE ▲	ZIP CODE ▲

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1.			
I		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spons
SCALISE LEADERS	HIP FUND 2024		
Mailing Address	320 1ST ST SE		
	WASHINGTON	l DC l	20003
		STATE A	ZIP CODE ▲
Relationship:	CITY A		Z.: 00DL Z
	CITY ▲ and Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee X Joint		ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee X Joint for by name, address (phone number – optional)		ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Joint for by name, address (phone number – optional) CITY	t Fundraising Represent	

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
-	I Organization, Affiliated Committee, Joint Fund REPUBLICAN NOMINEE FUND 2024	draising Representative	e, or Leadership PAC Spons
KEDDTT OK KS-03	LEI OBLICAN NOMINEL I GND 2024		
Mailing Address	PO BOX 9891		
	ARLINGTON	VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee Joi	nt Fundraising Represent	Leadership 170 op
		nt Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi		nt Fundraising Represent	Leadership 1740 ope
esignated Agent: Identi		nt Fundraising Represent	Leadership 1740 op
esignated Agent: Identi		nt Fundraising Representation	
Full NameMailing Address	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi	fy by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or many part of the control of the	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Deposite afety deposit boxes or make the property of the property of the position of the property of the position of the property of the propert	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which anintains funds. Bridge Bank	STATE A Telephone Number	ZIP CODE A

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Any Connected C	_	red Committee, Joint	FEC ID FEC ID	number number number number	C C C
-	_	red Committee, Joint	FEC ID	number	С
-	_	red Committee, Joint	FEC ID		
-	_	red Committee, Joint		number	С
-	_	ed Committee, Joint			
-	_	ed Committee, Joint			
	•		Fundraising Rep	resentative	, or Leadership PAC Spon
ng Address	PO BOX 30844				
	BETHESDA			MD	20824
ionship:		CITY A		STATE ▲	ZIP CODE ▲
me					
Address					
OR POSITION	▼	CITY A	5	STATE A	ZIP CODE ▲
			Telenhone Ni	. 1 .	. - -
	Address	BETHESDA ionship: Connected Organization X Af d Agent: Identify by name, address (p	BETHESDA ionship: CITY Connected Organization Affiliated Committee d Agent: Identify by name, address (phone number – option me Address CITY C	BETHESDA ionship: CITY Connected Organization Affiliated Committee Joint Fundraising Agent: Identify by name, address (phone number – optional) Address OR POSITION CITY CITY CITY CITY CITY CITY SOME SETHESDA Affiliated Committee Joint Fundraising CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY	BETHESDA Gonnected Organization Affiliated Committee Joint Fundraising Representate Address OR POSITION STATE A STATE A STATE A STATE A STATE A STATE A