



One Security Benefit Place
Topeka, Kansas 66636
SecurityBenefit.com

April 23, 2025

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

Re: Amended Statement of Organization
Security Benefit Corporation (now Eldridge Wealth Solutions, Inc.) Federal
Political Action Committee
FEC ID #C00216358

Dear Sir or Madam,

Please accept this as the amended Statement of Organization for the Eldridge Wealth Solutions, Inc. (formerly Security Benefit Corporation) Federal Political Action Committee. Please also note that the Committee's E-Mail Address, Custodian of Records, and Treasurer have changed.

Please do not hesitate to contact me at (785) 438-3267 should you have any questions.

Thank you.

Very truly yours,

Lisa Young
Treasurer, Eldridge Wealth Solutions, Inc.
Federal Political Action Committee

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEC MAILCENTER
1025 APR 24 AM 10: 19

Office Use Only

1. NAME OF
COMMITTEE (in full) (Check if name
is changed) Example: If typing, type
over the lines.

12F84M5

Eldridge Wealth Solutions, Inc. Federal Political Action Committee

ADDRESS (number and street) One Security Benefit Place

(Check if address
is changed)

Topeka
CITY ▲

KS
STATE ▲

66636
ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

lisa.young@securitybenefit.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

None

2. DATE MM / DD / YYYY 2025

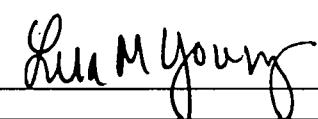
3. FEC IDENTIFICATION NUMBER ►

C 00216358

4. IS THIS STATEMENT NEW (N) OR 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 Lisa Young

Signature of Treasurer 

Date

MM / DD / YYYY 04 / 21 / 2025

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
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 03/2022)

Write or Type Committee Name

Eldridge Wealth Solutions, Inc. Federal Political Action Committee

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Eldridge Wealth Solutions, Inc.

Mailing Address

One Security Benefit PlaceTopekaKS66636-0001

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Lisa Young

Mailing Address

One Security Benefit PlaceTopekaKS66636-0001

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

785 - 438 - 3267

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of TreasurerLisa Young

Mailing Address

One Security Benefit PlaceTopekaKS66636-0001

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

785 - 438 - 3267

Full Name of
Designated
Agent

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

UMB Bank

Mailing Address

P.O. Box 419225

Kansas City

KS

64141

- 6226

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

5(i) or (j). Joint Fundraising Participant:

1. _____
2. _____
3. _____
4. _____

FEC ID number
C _____
C _____
C _____
C _____

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

_____ - _____

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name _____

Mailing Address _____

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number _____ - _____ - _____

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank,
Depository, etc.

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Extremely Urgent

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

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<i>WDS</i> PREPARER	<i>4/24/25</i> DATE PREPARED	

(4/2023)