

FILED

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FOR THORN BURG  
SECRETARY OF STATE

# STATEMENT OF ORGANIZATION

## 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 type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name Lyon County Democrat Committee

Mailing Address (Street, City, State, Zip Code) Business Telephone ( )

CHAIRPERSON

Name Gerald L. Karr Home Telephone (620) 343-1607

Mailing Address (Street, City, State, Zip Code) 1155 N. Hwy. 99 Emporia 66801 Business Telephone (620) 343-1607

TREASURER

Name Barbara Jensen Home Telephone (620) 343-1583

Mailing Address (Street, City, State, Zip Code) 2311 W. Bayfront Ct. Emporia 66801 Business Telephone (620) 343-1583

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."

9/12/02

(Date)

Gerald L. Karr

(Signature of Chairperson)