

# STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED

(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

FEB 08 2023

KS Governmental Ethics Commission

### COMMITTEE (PLEASE TYPE OR PRINT)

Name	St. Howard County Democratic Central Comm	
Mailing Address (Street, City, State, Zip Code)	Business Telephone	
119 S. Union St	( )	

### CHAIRPERSON

Name	Home Telephone
David Purvis	(620) 352-0806
Mailing Address (Street, City, State, Zip Code)	Business Telephone
119 S. Union St. St. Howard, KS	( )
67578	

### TREASURER

Name	Home Telephone
Michael Hathaway	(620) 786-4955
Mailing Address (Street, City, State, Zip Code)	Business Telephone
522 E South Ave St. John, KS. 67576	(620) 234-5664

### 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."

11-28-22  
(Date)

David Purvis  
(Signature of Chairperson)

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**Campaign Finance  
Statement of Organization  
For Political Action Committees  
And Party Committees**

Governmental Ethics Commission  
901 S. Kansas Ave.  
Topeka, KS 66612  
Office (785) 296-4219  
Fax (785) 296-2548  
ethics.kansas.gov

This is a (Check one)  **Party Committee**  **PAC**

This is an (Check one)  **Initial Appointment**  **Amended Statement**

**Committee** Name: **Stafford County Demcratic Central Committee**

Address: **119 S. Union St.**

Address2:

City: **Stafford** State: **KS** Zip: **67578**

Business Phone: **(620) 352-0806**

Email Address: **decurtissample@hotmail.com**

**Chairperson** Name: **David Curtis**

Address: **119 S. Union St.**

Address2:

City: **Stafford** State: **KS** Zip: **67578**

Home Telephone: **(620) 352-0806** Business Phone:

Email Address: **decurtissample@hotmail.com**

**Treasurer** Name: **Michael Hathoway**

Address: **522 E. South Ave.**

Address2:

City: **St. John** State: **KS** Zip: **67576**

Home Telephone: **(620) 786-4955** Business Phone: **(620) 234-5664**

Email Address: **decurtissample@hotmail.com**

**Affiliated or** Name:

**Connected** Address:

**Organizations** Address2:

City: State: Zip:

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

**local political committee**

**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.**

Executed on:

Date: **10/23/2020 10:34:45 AM** Signature of Chairperson: **David Curtis**

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