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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: **Coffey County Democrats**

Address: **P.O. Box 225**

Address2:

City: **Lebo** State: **KS** Zip: **66856**

Business Phone: **(620) 794-0062**

Email Address: **jamiejarvis14@gmail.com**

Chairperson

Name: **Jamie Jarvis**

Address: **P.O. Box 225**

Address2:

City: **Lebo** State: **KS** Zip: **66856**

Home Telephone: Business Phone: **(620) 794-0062**

Email Address: **jamiejarvis14@gmail.com**

Treasurer

Name: **Janet Lewis**

Address: **P.O. Box 301**

Address2:

City: **Lebo** State: **KS** Zip: **66856**

Home Telephone: Business Phone:

Email Address: **jamiejarvis14@gmail.com**

**Affiliated or
Connected
Organizations**

Name: **Kansas Democratic Party**

Address: **501 SE Jefferson**

Address2: **St. 30**

City: **Topeka** State: **KS** Zip: **66607**

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

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: **2/13/2023 6:51:24 PM** Signature of Chairperson: **Jamie Jarvis**

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