STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

		(G., D., G: 1	- E In-st-		
	This is a (about one)	(See Reverse Sid		Political Action Com	RECEIVED
:	This is a (check one) This is an (check one)	Initial States	=	Amended Statement	100
	This is all (check one)			Timorida Satomoni	SOOm
COMMITTEE		(PLEASE TY	E OR PRI	NT)	SECRETARY OF STATE
Name Jeffers	son County Central	Democratic Part	у		
	ess (Street, City, State berg/PO Box 1.65 M		12	Business Tele	phone
CHAIRPERSO	ON				
Name Julie Wilson			Home Telephone (620) 899-4846		
	ess (Street, City, State y Pt Meriden, KS 6			Business Tele	phone
TREASURER					
Name Paula	Higley			Home Telepho	ne 15-5826
Mailing Addre 9827 Gree	ess (Street, City, State nview Drive	, Zip Code)		Business Tele	phone
AFFILIATED	OR CONNECTED O	ORGANIZATION	S		
Name	emocratic Party	71.G7 11.11.21.11.01.1			
_	ess (Street, City, State 4, Topeka. KS. 666	•			
If not connected	or affiliated with an org	ganization, identify	the trade, p	rofession, or primar	y interest of the contributors
belief is true, c	this statement has bee orrect and complete. filing a false docume	I understand that	the intention	nal failure to file th	_
(Date)			Signature of	f Chairperson)	
Governmental I	Ethics Commission				Rev.200

Reset page

STATEMENT OF ORGANIZATION

RECEIVED

FOR PO	DLITICAL ACTI	ON COMMITTE	ES AND PARTY	APR 01 2022 COMMITTEES SCOTT SCHWAB SECRETARY OF STATE					
(See Reverse Side For Instructions)									
	This is a (check one)	Party Committee	Political Action Com	mittee					
	This is an (check one)	Initial Statement	Amended Statement						
COMMITTEE (PLEASE TYPE OR PRINT)									
Name Jeffers	on County Democra	ats							
	ess (Street, City, State, y Pt, Meriden, KS. 6		Business Telephone (620) 899-4846						
CHAIRPERSO	ON								
Name Donald Schaeffer			Home Telephone (785) 250-8206						
Mailing Addre	ss (Street, City, State, view Drive, Ozwakie,	Business Tele	phone						
TREASURER									
Name Julie V	Vilson		Home Telepho (620) 89	ne 99-4846					
Mailing Address (Street, City, State, Zip Code) 6442 Hickory Pt, Meriden, KS. 66512 Business Telephone ()									
AFFILIATED	OR CONNECTED O	PRGANIZATIONS							
Name KS De	mocratic Party								
Mailing Address (Street, City, State, Zip Code) PO Box 1914, Topeka, KS. 66601									
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."									
$\frac{3-3/-}{\text{(Date)}}$		<u>V) awy</u> (Signat	ure of Chairperson)	restat area e					
Governmental F	Ethics Commission		// Priπ	t page Rev.2000					