

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED
SEP 04 2024
SCOTT SCHWAB
SECRETARY OF STATE

(See Reverse Side For Instructions)

This is a (check one)	<input checked="" type="checkbox"/> Party Committee	<input type="checkbox"/> Political Action Committee
Initial Statement (check one)	<input type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Osage County Kansas Democratic Central Committee	
Mailing Address (Street, City, State, Zip Code)	964 W149th St Scranton, KS 66537	Business Telephone (785) 640-8658

CHAIRPERSON

Name	Cynthia Lash	Home Telephone (785) 640-8658
Mailing Address (Street, City, State, Zip Code)	964 W 149th St Scranton, KS 66537	Business Telephone ()

TREASURER

Name	Ken Yocum	Home Telephone (785) 408-3139
Mailing Address (Street, City, State, Zip Code)	30967 S California Rd	Business Telephone ()

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."

9/3/24
(Date)

Cynthia Lash
(Signature of Chairperson)

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COMMITTEE (PLEASE TYPE OR PRINT)

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Mailing Address (Street, City, State, Zip Code)
964 W 149th St Scranton, KS 66537

Business Telephone
(785) 640-8658

CHAIRPERSON

Name
Cynthia Lash

Home Telephone
(785) 640-8658

Mailing Address (Street, City, State, Zip Code)
964 W 149th St Scranton, KS 66537

Business Telephone
()

TREASURER

Name
Paul Lira

Home Telephone
(785) 793-2736

Mailing Address (Street, City, State, Zip Code)
1334 W 189th St Scranton, KS 66537

Business Telephone
()

AFFILIATED OR CONNECTED ORGANIZATIONS

Name
Kansas Democratic Party

Mailing Address (Street, City, State, Zip Code)
PO Box 1914 Topeka, KS66201

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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."

11/29/20
(Date)

Cynthia Lash
(Signature of Chairperson)