

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)	119 S. Union St	
Business Telephone	()	

CHAIRPERSON

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

TREASURER

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

AFFILIATED OR CONNECTED ORGANIZATIONS

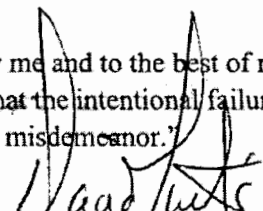
Name	
Mailing Address (Street, City, State, Zip Code)	

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)


(Signature of Chairperson)