APR 13 200.	STAT	EMENT OF OR	GANIZATI(ON		
FOR POLE	TICAL ACTION	EMENT OF OR ON COMMITTE	ES AND PA	RTY COM	MITTEES	
SECTION		(See Reverse Side For	Instructions)			
Thi	s is a (check one)	Party Committee		tion Committee		
	, , , ,					
1 hi	s is an (check one)	Initial Statement	Amended S	statement		
COMMITTEE (PLEASE TYPE OR PRINT)						
Name KU Y	OUNG DEM	DCRATS				
Mailing Address (S		Zip Code) D. Lawrence, KS	,	ess Telephone		
CHAIRPERSON	y	,				
Name Julia Groeblacher			Home Telephone (620) 241 - 2954			
Mailing Address (Street, City, State, Zip Code) 1445 Briarwood Ln. McPherson KS 6746			Business Telephone (785) 760 - 1808			
TREASURER		,				
Name David He	o/sman/		Home 7 (913	Telephone) 780-5402		
Mailing Address (Street, City, State, Zip Code) 15016 W. 150th St. Clathe, KS 66062			Business Telephone (913) 48\ - 8035			
AFFILIATED OR	•					
Name Youn	g Democra	ts of America	·			
Mailing Address (S	treet, City, State,	Zip Code)				
PO Box 774	96, Washingto	on, DC, 20013				
	,	nnization, identify the tra	ade, profession, or	primary interest	of the contributors.	
belief is true, correc	t and complete. I	examined by me and t understand that the int t is a class A misdeme	entional failure t	-	nent	
<u>04-04-07</u> (Date)		(Signate	har of Chairperso	on)	_	
Coxyommontal Ethin	Commission				n 2000	

Governmental Ethics Commission

Rev.2000

RECEIVED STATEMENT OF ORGANIZATION

RON THORNBURGH SECRETARY OF STATE (See Reverse Side For Instructions) This is a (check one) Party Committee Political Action Committee This is an (check one) Initial Statement Amended Statement COMMITTEE (PLEASE TYPE OR PRINT)						
This is a (check one) Party Committee Political Action Committee This is an (check one) Initial Statement Amended Statement						
This is an (check one) Initial Statement Amended Statement						
COMMITTEE (PLEASE TYPE OR PRINT)						
COMMITTEE (PLEASE TYPE OR PRINT)						
Name KU Young Democrats						
Mailing Address (Street, City, State, Zip Code) Room 400, 1301 Jayhawk Blvd. Lawrence, KS, 66045 Business Telephone (NA)						
CHAIRPERSON						
Name Home Telephone (316) 461-0070						
Mailing Address (Street, City, State, Zip Code) Business Telephone 3223 E. English, Wichita, KS, 67218 (316) 461-0070						
TREASURER						
Name Home Telephone Monica Crane (316) 680-3789						
Mailing Address (Street, City, State, Zip Code) 1322 N. Woodlawn #127, Wichita, KS, 67208 Business Telephone (316) 680-3789						
AFFILIATED OR CONNECTED ORGANIZATIONS						
Name Young Democrats of America						
Mailing Address (Street, City, State, Zip Code) PO Box 77496, Washington, DC, 20013						
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributor						
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." (Signature of Chairperson)						
Governmental Ethics Commission Rev 200						

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JAN 1 1 2006

STATEMENT OF ORGANIZATION

RONTHORNBURGH SECRETARE A CTIONICOMMITTEES AND DARTY COMMITTEES

FASR PUREFICAL ACTION COMMITTEES AND PARTY COMMITTEES
(See Reverse Side For Instructions)
This is a (check one) Party Committee Political Action Committee
This is an (check one)
COMMITTEE (PLEASE TYPE OR PRINT)
Name KU Young Democrats
Mailing Address (Street, City, State, Zip Code) Room 400, Kansas Union, 1301 Jayhawk Blvd. Lawrence, () NA
CHAIRPERSON
Name Home Telephone Marc Langston (316) 461-0070
Mailing Address (Street, City, State, Zip Code) 3223 E. English, Wichita, KS, 67218 Business Telephone (316) 461-0070
TREASURER
Name Home Telephone Alex Treaster (913) 669-7829
Mailing Address (Street, City, State, Zip Code) Business Telephone 21516 W. 72nd St., Shawnee, KS, 66218 Business Telephone (913) 669-7829
AFFILIATED OR CONNECTED ORGANIZATIONS
Name Young Democrats of America
Mailing Address (Street, City, State, Zip Code)
P.O. Box 77496, Washington, DC 20013-8496
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."
(Date) (Signature of Chairperson)
Governmental Ethics Commission Rev.2000