

STATEMENT OF ORGANIZATION

FOR POLITICAL 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) Initial Statement Amended Statement
COMMITTEE (PLEASE TYPE OR PRINT)
Name C / C / C / C / C / C / C / C / C / C
SOUTH Segwick Co. Demicratic CLUB
Mailing Address (Street, City, State, Zip Code) Business Telephone 410 3 5, W17 CO W1CH1774 (376) 529-3555
CHAIRPERSON
Name Home Telephone (3/t) 529-3555
Mailing Address (Street, City, State, Zip Code) HIU3 S. WACO [NICHIIA 67277(316) 529-3555
TREASURER
Name Home Telephone (316) 522-2719
Mailing Address (Street, City, State, Zip Code) Business Telephone Wicharta 15
67217 AFFILIATED OR CONNECTED ORGANIZATIONS
Name WE DO NOT PHY OR RECIVE WAY
Mailing Address (Street, City, State, Zip Code) To Dem Q-CANADATES
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If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors. WE SUPPORT DEMO. FOR COUNTY &
57A-14 OFFICES IN PRIOR TO CENEMY GLESTO
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."
7-28-8 La Chille
(Date) (Signature of Chairperson)
Governmental Ethics Commission Rev.2000

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FEB	- January	5	2007	

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Name
SOUTH Sequick Co DemocRATIC CLUB
Mailing Address (Street, City, State, Zip Code) Business Telephone 4/03 5 WACO WICHITA 15 67217 (316) 529 3555
1013 1013 1013 1013 1013 1013 1013 1013
CHAIRPERSON
Name JACK D. METZ Home Telephone 9-3555
Mailing Address (Street, City, State, Zip Code) 10035. WACD WICHIMA 155 () Business Telephone
67217 -3649
TREASURER
Name Ronald TRACY Home Telephone (316) 522-2719
Mailing Address (Street, City, State, Zip Code) 3415 Southwood CT Wichita Ks ()
47217-344/ 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." (Date) (Signature of Chairperson)

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