AFFIDAVIT OF EXEMPTION IMPORT FLING RECEIPTS AND EXPENDITURES REPORTS BY A PARTY COMMITTEE OR POLITICAL ACTION COMMITTEE/PREMEMENT Ethics COMMENTICAL ACTION COMMITTEE/PREMEMENT Ethics FORM THE RECEIVED ON REPERDING OF CONTRACTING TO EXPEND 5800 OR MORE IN CALENDAR YEAR 2010 OR IF YOU WILL RECEIVE A CONTRIBUTION IN EXCESS OF \$50 FROM ANY ONE CONTRIBUTION, THIS FORM MAY NOT BE USED. Instructions: This form muy be used by the treasurer of any party committee or political action committee which qualifies for the exemption. THIS AFFIDAVIT MUST BE FILED WITH THE SECTEARY OF STATE (2005 SW 10%) * Preor Menorial Hail, TOPEKA, KANSAS 66012) FULO TO JULY26 2010. If a party or political action committee qualifies for the exemption. THIS AFFIDAVIT MUST BE FILED WITH THE SECTEARY OF STATE (2005 SW 10%) * Preor Menorial Hail, TOPEKA, KANSAS 66012) FULO TO JULY26 2010. If a party or political action committee qualifies for the semption. THIS AFFIDAVIT MUST BE FILED WITH THE SECTEARY OF STATE (2005 SW 10%) * Preor Menorial Hail, TOPEKA, KANSAS 66012) FULO TO JULY26 2010. If a party or political action committee qualifies for the semption. INTERS FILED VITH THE SECTEARY OF STATE (2005 SW 10%) * Preor Menorial Hail, TOPEKA, KANSAS 66012) FULO TO JULY26 2010. If a party or political action committee intends to Organization in must be filed and the ursaure of the SC 11/10/2010 SC 1000. POLICI OF LEAF PUPIDE A Name of Committee gualifies for the SC 2000 <td colspa<="" th=""><th>RECEIVED</th><th></th></td>	<th>RECEIVED</th> <th></th>	RECEIVED	
YEAR 2010 OR IF YOU WILL RECEIVE A CONTRIBUTION IN EXCESS OF \$50 FROM ANY ONE CONTRIBUTOR, THIS FORM MAY NOT BE USED. Instructions: This form may be used by the treasurer of any party committee or political action committee which qualifies for the exemption. THIS AFFIDAVIT MUST BE FILED WITH THE SECRET ARY OF STATE (120 SW 10°, 1° Floor Memorial Hall, TOPEKA, KANSAS G6612) FRIOTO JULY26, 2010. If a party or political action committee qualifies for this exemption, a Statement of Organization still must be filed and the treasurer must maintain the required records. (K.S.A. 25-4145) PLEASE PRINT OR TYPE A. Name of Committee. POILING: A DS.A., POROX 586_ City_Oling	FROM FILING RECEIPTS AND EXPENDITURES REPORTS		
THIS AFFIDAVIT MUST BE FILED WITH THE SECRETARY OF STATE (120 SW 10°, 1° Floor Memorial Hall, TOPEKA, KANSAS 66613) PRIOR TO JULYG, 2010. If a party or political action committee qualifies for this exemption, a Statement of Organization still must be filed and the treasurer must maintain the required records. (K.S.A. 25-6145) PLEASE PRINT OR TYPE A. Name of Committee	YEAR 2010 OR IF YOU WILL RECEIVE A CONTRIBUTION IN EXCESS OF \$50 FROM ANY ONE CONTRIBUTOR, THIS		
66612) PRIOR TO JULY26, 2010. If a party or political action committee qualifies for this exemption, a Statement of Organization still must be filed and the treasurer must maintain the required records. (K.S.A. 25-6145) PLEASE PRINT OR TYPE A. Name of Committee	Instructions: This form may be used by the treasurer of any party committee or political action committee which qualifies for the exemption.		
A. Name of Committee <u>Pellific al Achiba Council of Selina</u> Address <u>120 W Bsh</u> , <u>PD Box 586</u> city <u>Selina</u> zip Code <u>(27402-0586</u>) Telephone <u>785</u> . <u>827-9301</u> B. Name of Tressurer <u>Dennis Laurer</u> Address <u>120 W Ash</u> , <u>PD Box 586</u> city <u>Selina</u> <u>Zip Code (27402-0586</u>) Home Telephone <u>785</u> <u>Business Telephone</u> <u>785 527-9301</u> C. Affidavit: <u>State of Kanass</u>) County of <u>Seline</u> I, <u>Dennis Laurer</u> tressurer of the <u>Pellifical Achiba Council of Colona</u> do swear (or affirm) that: (Name of Party or Political Action Committee) 1. The information in terms A and B above is true and correct; 2. For the election year to which this affidavit applies, the above party or political action committee intends to receive contributions in an aggregate amount or value of less than five hundred dollars (S500) 5. For the election year to which this affidavit applies, the above party or political action committee intends to receive no contributions in an aggregate amount or value of less than five hundred dollars (S500) 6. For the election year to which this affidavit applies, the above party or political action committee intends to receive no contributions in an aggregate amount or value of less than five hundred dollars (S500) 6. For the election year to which this affidavit explies, the above party or political action committee intends to receive no contributions in an aggregate amount or value of less than five hundred dollars (S500) 7. If contributions are received or expenditures made, actual or contractual, in excess of any of the amounts set out above during any calendar year to which this affidavit applies, that above party or political action committee intends to receive no contributions an aggregate amount or value of Less than five hundred dollars (S500) 7. Jo Cole Subscribed and sworn to (affirmed) before me this <u>23</u> day of <u>With With X5A, 25-4148, (X5A, 25-4148, (X5A, 25-4176)</u> <u>(Notary Public)</u> Notary Public) Notary Public)	66612) PRIOR TO JULY26, 2010. If a party or political action committee qualifies for this exemption, a Statement of Organization still		
Address 120 W Pish, DOBOX 586 _ City _ Siling zip Code _ 67402-0586 Telephone 785.827-9301 B. Name of Treasurer _ Dennik / QUUVE/ Address 200 W Ath, PO BOX 586 _ City Siling _ Zip Code <u>67402-0586</u> Home Telephone 785 Address 200 W Ath, PO BOX 586 _ City Siling _ Zip Code <u>67402-0586</u> Home Telephone 785 C. Affidavit: State of Kansas	PLEASE PRINT OR TYPE		
Telephone 785.827-930 B. Name of Treasurer Dennis (auver) Address (DOW) Ash, PO Box 58(c) City SAIMQ Zip Code (67402-058(c) Home Telephone 785 Business Telephone 785.527-930/ C. Affidaviti: State of Kansgs) County of Soline	A. Name of Committee Polifical Action Council of Saling		
B. Name of Treasurer <u>Dennis Lauvec</u> Address <u>Daw Arch</u> , <u>PO Box 586</u> city <u>SalMa</u> <u>zip Code (27402-0586</u>) Home Telephone <u>785</u> <u>Business Telephone</u> <u>785 S27-9301</u> C. Affidavit: <u>State of Kansss</u>) <u>County of Selface</u> I. <u>Dennis Lauver</u> treasurer of the <u>Poliffical Acthom Council of SalMa</u> do swear (or affirm) that: (Name of Party or Political Action Committee) 1. The information in Items A and B above is true and correct; 2. For the election year to which this affidavit applies, the above party or political action committee intends to exceed, to contract to expend, or has expended, an aggregate amount or value of less than five hundred dollars (S500); 3. For the election year to which this affidavit applies, the above party or political action committee intends to receive contributions in an aggregate amount or value of less than five hundred dollars (S500); 4. For the election year to which this affidavit applies, the above party or political action committee intends to receive contributions in an aggregate amount or value of less than five hundred dollars (S500); 5. For the election year to which this affidavit applies, the above party or political action committee intends to receive on contributions are received or expenditores made, actual or contractual, in excess of any of the automut or value of less than five hundred dollars (S500); 5. If contributions are received or expenditores made, actual or contractual, in excess of the date of such excess file all past due Receipts and Expenditures Reports and shall file all such future reports on the dates required by K.S.A. 25-4148. (K.S.A. 25-4176) <u>7-23-70</u> (Date) (Signature of Treasurer) Subscribed and sworn to (affirmed) before me this <u>3</u> day of <u>Muty</u> <u>10-205010</u> <u>Notary Public</u>) <u>Notary Public</u> , <u>102011</u> (Notary Public)	Address 120 W Ash, POBOX 586 City Soling Zip Code 67402-0586		
Address <u>DOW</u> Ash, <u>PO Box 586</u> City <u>SIMA</u> Zip Code <u>67402.0586</u> Home Telephone <u>785</u>	Telephone 785. 827-9301		
Home Telephone 785 Business Telephone 785 £27-930/ C. Affidaviti: State of Kansas State of Kansas) County of Schine			
C. Affidavit: State of Kanses County of <u>Scline</u> , 1. <u>Dennis Lauves</u> , treasurer of the <u>Polifical Acthor Council of Clina</u> do swear (or affirm) that: (Name of Party or Political Action Committee) 1. The information in Items A and B above is true and correct; 2. For the election year to which this affidavit applies, the above party or political action committee intends to expend, to contract to expend, or has expended, an aggregate amount or value of less than five hundred dollars (S500); 3. For the election year to which the affidavit applies, the above party or political action committee intends to receive contributions in an aggregate amount or value of less than five hundred dollars (S500); 4. For the election year to which this affidavit applies, the above party or political action committee intends to receive no contributions in an aggregate amount or value of less than five hundred dollars (S500); 5. For the election year to which this affidavit applies, the above party or political action committee intends to receive no contributions an aggregate amount or value of less than five hundred dollars (S500); 5. For the election year to which this affidavit applies, the above party or political action committee intends to receive no contributions an aggregate amount or value in excess of fifty dollars (S50) from any one contributor; 5. If contributions are received or expenditures made, actual or contractual, in excess of any of the amounts set out above during any calendar year to which this affidavit applies, I shall within three (3) days of the date of such excess file all past due Receipts and Expenditures Reports and shall file all such future reports on the dates required by K.S.A. 25-4148. (K.S.A. 25-	Address 120W-Ash, PO Box 586 City Salling Zip Code 67402-0586		
State of Kansas County of <u>Scline</u> , 1. <u>Dennis Lawer</u> , treasurer of the <u>Polifical Action Council of Cama</u> do swear (or affirm) that: (Name of Party or Political Action Committee) 1. The information in Items A and B above is true and correct; 2. For the election year to which this affidavit applies, the above party or political action committee intends to expend, to contract to expend, or has expended, an aggregate amount or value of less than five hundred dollars (\$500); 3. For the election year to which the affidavit applies, the above party or political action committee intends to receive contributions in an aggregate amount or value of less than five hundred dollars (\$500); 4. For the election year to which this affidavit applies, the above party or political action committee intends to receive no contributions in an aggregate amount or value in excess of fifty dollars (\$500) from any one contributor; 5. If contributions are received or expenditures made, actual or contractual, in excess of any of the amounts set out above during any calendar year to which this affidavit applies, the above party or political action committee intends to receive on contributions are received or expenditures made, actual or contractual, in excess of any of the amounts set out above during any calendar year to which this affidavit applies, the above party or political action freasurer) Subscribed and sworn to (affirmed) before me this 23 day of <u>Muty</u> <u>207010</u> (Notary Public). My Appointment Expires <u>417</u> , 20 2011	Home Telephone 785 Business Telephone 785-827-9301		
Delifical Action Council of SciMa (Name of Party or Political Action Committee) do swear (or affirm) that: 1. The information in Items A and B above is true and correct; 2. For the election year to which this affidavit applies, the above party or political action committee intends to expend, to contract to expend, or has expended, an aggregate amount or value of less than five hundred dollars (\$500); 3. For the election year to which the affidavit applies, the above party or political action committee intends to receive contributions in an aggregate amount or value of less than five hundred dollars (\$500); 4. For the election year to which this affidavit applies, the above party or political action committee intends to receive contributions in an aggregate amount or value in excess of fifty dollars (\$50) from any one contributor; 5. If contributions are received or expenditures made, actual or contractual, in excess of any of the amounts set out above during any calendar year to which this affidavit applies, I shall within three (3) days of the date of such excess file all past due Receipts and Expenditures Réports and shall file all such future reports on the dates required by K.S.A. 25-4148. (K.S.A. 25-4176) 7-23-70 (Signature of Treasurer) Subscribed and sworn to (affirmed) before me this 23 day of Mary Duble. Notary Public. Notary Public. Notary Public. My Appointment Expires (4/17) Applic. (Notary Public.			