

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED JUL 14 2022 KS Governmental Ethics Commission

(See Reverse Side For Instructions)

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

COMMITTEE (PLEASE TYPE OR PRINT)

Name Douglas County Black Republican Council	
Mailing Address (Street, City, State, Zip Code) 3818 Daylily Court, Lawrence, KS, 66049	Business Telephone (785) 845-9159

CHAIRPERSON

Name Michael Austin	Home Telephone (785) 845-9159
Mailing Address (Street, City, State, Zip Code) 3818 Daylily Court, Lawrence, KS, 66049	Business Telephone (785) 845-9159

TREASURER

Name Alyssa Austin	Home Telephone (785) 766-6484
Mailing Address (Street, City, State, Zip Code) 3818 Daylily Court	Business Telephone (785) 766-6484

AFFILIATED OR CONNECTED ORGANIZATIONS

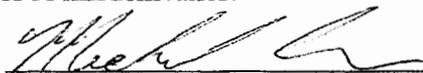
Name
Mailing Address (Street, City, State, Zip Code)

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

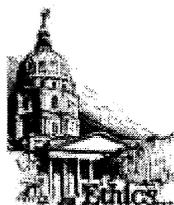
SIGNATURE:

"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."

7/14/2022
(Date)


(Signature of Chairperson)

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**Campaign Finance
Statement of Organization
For Political Action Committees
And Party Committees**

Governmental Ethics Commission
901 S. Kansas Ave.
Topeka, KS 66612
Office (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is a (Check one) Party Committee PAC

This is an (Check one) Initial Appointment Amended Statement

Committee Name: **Douglas County Black Republican Council**

Address: **3818 Daylily Court**

Address2:

City: **Lawrence** State: **KS** Zip: **66049**

Business Phone: **(178) 584-5915**

Email Address: **mcoolridge14@hotmail.com**

Chairperson Name: **Michael Austin**

Address: **3818 Daylily Court**

Address2:

City: **Lawrence** State: **KS** Zip: **66049**

Home Telephone: Business Phone: **(785) 845-9159**

Email Address: **mcoolridge14@hotmail.com**

Treasurer Name: **Michael Austin**

Address: **3818 Daylily Court**

Address2:

City: **Lawrence** State: **KS** Zip: **66049**

Home Telephone: Business Phone: **(178) 584-5915**

Email Address: **mcoolridge14@hotmail.com**

Affiliated or Name:

Connected Address:

Organizations Address2:

City: State: Zip:

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

To officially represent the interest of black Republicans in the Douglas Black Republican Council.

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.

Executed on:

Date: **12/28/2021 2:10:52 PM** Signature of Chairperson: **Michael Austin**

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