| NOV 12 2008  NOV 12 2008  STATEMENT OF ORGANIZATION  SECTOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES   |
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| SECTOR 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 Tewell County Republican Control Committee  Mailing Address (Street, City, State, Zip Code)  1440 165 Rd PO Box 146 (785) 378 3844  Markato F> 66956  |
| Mailing Address (Street, City, State, Zip Code)  1440 165 Rd PO Box 146 (785) 378 3844   |
| CHAIRPERSON CHAIRPERSON  |
| Name Home Telephone (785) 3783408  |
| Mailing Address (Street, City, State, Zip Code)  Business Telephone  725 wwebster PO Box 364 (785) 379 340 8  Mantetors 66956  |
| Mantetors 66956<br>TREASURER   |
| Name Home Telephone ()   |
| Mailing Address (Street, City, State, Zip Code)  Business Telephone  Po Box 146, Max Fato F>66956()  |
| 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 contributor  |
|  |
| SIGNATURE: "I declare that this statement has been examined by me and to the best of my knowledge and  |
| "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."  9-20-208  |
| (Date) (Signature of Chairperson)  |
| Governmental Ethics Commission Rev.200   |

## STATEMENT OF ORGANIZATION PPICAL ACTION COMMITTEES AND PARTY COMMITTEES (See Reverse Side For Instructions) Party Committee Political Action Committee This is a (check one) Amended Statement This is an (check one) Initial Statement COMMITTEE (PLEASE TYPE OR PRINT) Name Mailing Address (Street, City, State, Zip Code) Business Telephone POBOX MG Montato R> 66956 **CHAIRPERSON** Name Home Telephone Keith Roe (785) 3783408 Mailing Address (Street, City, State, Zip Code) Business Telephone PO BOX 364 Markato ES 66956 TREASURER Name Home Telephone Margo Baird Mailing Address (Street, City, State, Zip Code) Business Telephone 66956 POBOXING Mantato 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." (Signature of Chairperson)

Rev.2000

Governmental Ethics Commission

| STATEMENT OF ORGANIZATION  FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES  (See Reverse Side For Instructions)   | ES          |
|--|-------------|
| See Reverse Side For Instructions)  Governmental Ethics Et | mmission    |
| This is a (check one)  Party Committee  Political Action Committee   |             |
| This is an (check one)   |             |
| COMMITTEE (PLEASE TYPE OR PRINT)   |             |
| Name Jewell Co Rap C C   |             |
| Mailing Address (Street, City, State, Zip Code)  Business Telephone  225 W webster Montento (566956(785) 3783408   | >           |
| CHAIRPERSON  |             |
| Name Home Telephone (785) 378 3408   |             |
| Mailing Address (Street, City, State, Zip Code)  Dusiness Telephone  Dusiness Telephone  Dusiness Telephone  Dusiness Telephone  | 8           |
| TREASURER  |             |
| Name Candace Ourant Home Telephone (785) 428-35  | 16          |
| Mailing Address (Street, City, State, Zip Code)  RRH2 Box 204 Jewell 125 66 949 ( )  |             |
| 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 co   | ntributors. |
| 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."  15 J me 2004  (Signature of Chairperson)   |             |
| Governmental Ethics Commission   | Rev.2000    |

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