STATEMENT OF ORGANIZATION RECEIVED

300	,0 / 5177	ILMENT OF OI	COMINIZA			
OCFOR PROPERTY SECRETARY	PLINE AL ACTI	ON COMMITT	FES ANT		CT 25 2005 IMITTEES _{ission}	
ON THOPY S				109 TOP	WEST 9TH STREET EKA, KANSAS 66612	
(See Reverse Side For Instructions)						
Sir	This is a (check one)	X Party Committee	Polit	ical Action Committee		
	This is an (check one)	X Initial Statement	Ame	ended Statement]	
COMMITTEE (PLEASE TYPE OR PRINT)						
Name LANE COUNTY CENTRAL REPUBLICAN COMMITTEE						
Mailing Address (Street, City, State, Zip Code)				Business Telephone		
CHAIRPERS	ON					
Name RON MUSSELWHITE			H (ome Telephone 620) 397 – 2546		
Mailing Address (Street, City, State, Zip Code) P.O. BOX 925, DIGHTON, KANSAS 67839				Business Telephone		
TREASURER						
Name BETS	SY HINEMAN		H-(ome Telephone 620) 397–2504	4	
Mailing Address (Street, City, State, Zip Code) Business Telephone 116 S. LONGHORN RD., DIGHTON, KANSAS 67839 ()						
AFFILIATED	OR CONNECTED O	RGANIZATIONS				
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.						
belief is true, co	this statement has been orrect and complete. I	understand that the in	tentional fai	•		
(Date)		(Signat	re of Chair	person)		

Governmental Ethics Commission

Rev.2000