

RECEIVED

OCT 24 2008

STATEMENT OF ORGANIZATION **KS Governmental Ethics Commission**

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

FILED
OCT 27 2008
RON THORNBURGH
SECRETARY OF STATE

(See Reverse Side For Instructions)

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

COMMITTEE (PLEASE TYPE OR PRINT)

Name: Linn County Democratic Central Committee

Mailing Address (Street, City, State, Zip Code): 17200 E. 950 Rd, Mound City, KS 66056

Business Telephone: (913) 795-4574

CHAIRPERSON

Name: Denise Cassells

Home Telephone: (913) 795-4574

Mailing Address (Street, City, State, Zip Code): 17200 E. 950 Rd Mound City, KS 66056

Business Telephone: (913) 406-5209

TREASURER

Name: James Dale

Home Telephone: (913) 757-2084

Mailing Address (Street, City, State, Zip Code): 721 Hillside St. Colbyne, KS 66040

Business Telephone: () N/A - Retired

AFFILIATED OR CONNECTED ORGANIZATIONS

Name: Kansas State Democratic Party

Mailing Address (Street, City, State, Zip Code): PO Box 1914 Topeka, KS 66601

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."

10/22/2008
(Date)

Denise Cassells
(Signature of Chairperson)

FILED

JUL 28 2008

ROTHORNBURGH
SECRETARY OF STATE

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

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

COMMITTEE (PLEASE TYPE OR PRINT)

Name <i>Democrat Party</i>	
Mailing Address (Street, City, State, Zip Code) <i>P.O. Box 355 Pleasanton Ks 66075</i>	Business Telephone <i>(913) 352-8301</i>

CHAIRPERSON

Name <i>Rosalee DeMat</i>	Home Telephone <i>(913) 352-8301</i>
Mailing Address (Street, City, State, Zip Code) <i>P.O. Box 355 Pleasanton Ks 66075</i>	Business Telephone <i>(913) 352-8301</i>

TREASURER

Name <i>Jim Dale</i>	Home Telephone <i>(757) 2084</i>
Mailing Address (Street, City, State, Zip Code) <i>721 Hillside St La Crosse Ks</i>	Business Telephone <i>()</i>

AFFILIATED OR CONNECTED ORGANIZATIONS

Name <i>Democrat In Linn County Party</i>
Mailing Address (Street, City, State, Zip Code) <i>P.O. Box 355 Pleasanton Ks 66075</i>

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."

7/24/08
(Date)

Rosalee DeMat
(Signature of Chairperson)

FILED

JUL 28 2008

ROTHORNBURGH
SECRETARY OF STATE

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

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

COMMITTEE (PLEASE TYPE OR PRINT)

Name <i>Democrat Party</i>	
Mailing Address (Street, City, State, Zip Code) <i>P.O. Box 355 Pleasanton Ks 66075</i>	Business Telephone <i>(913) 352-8301</i>

CHAIRPERSON

Name <i>Rosalee DeMat</i>	Home Telephone <i>(913) 352-8301</i>
Mailing Address (Street, City, State, Zip Code) <i>P.O. Box 355 Pleasanton Ks 66075</i>	Business Telephone <i>(913) 352-8301</i>

TREASURER

Name <i>Jim Dale</i>	Home Telephone <i>(757) 2084</i>
Mailing Address (Street, City, State, Zip Code) <i>721 Hillside St La Crosse Ks</i>	Business Telephone <i>()</i>

AFFILIATED OR CONNECTED ORGANIZATIONS

Name <i>Democrat In Linn County Party</i>
Mailing Address (Street, City, State, Zip Code) <i>P.O. Box 355 Pleasanton Ks 66075</i>

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."

7/24/08
(Date)

Rosalee DeMat
(Signature of Chairperson)

RECEIVED

STATEMENT OF ORGANIZATION

JAN 09 2006

FILE
JAN 10 2006

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

Governmental Ethics Commission
1015 S. B STREET
TOPEKA, KANSAS 66612

(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 type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name Linn County Democrats

Mailing Address (Street, City, State, Zip Code) P.O. Box 355 Pleasanton KS 66075 Business Telephone (913) 352-8301

CHAIRPERSON

Name Rosalea Dematt Home Telephone (913) 352-8301

Mailing Address (Street, City, State, Zip Code) P.O. Box 355 Pleasanton KS Business Telephone (816) 630-6031

TREASURER

Name Deane Jones Home Telephone (913) 471-4648

Mailing Address (Street, City, State, Zip Code) Prescott KS Business Telephone ()

AFFILIATED OR CONNECTED ORGANIZATIONS

Name Linn County Democrats

Mailing Address (Street, City, State, Zip Code) P.O. Box 355 Pleasanton KS 66075

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."

1-8-05
(Date)

Rosalea Dematt
(Signature of Chairperson)