

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED

(See Reverse Side For Instructions)

JUL 14 2008

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

Governmental Ethics Commission

COMMITTEE (PLEASE TYPE OR PRINT)

Name *Decatur County Democratic Party*

Mailing Address (Street, City, State, Zip Code) *340 PO Box 29 101 S. Desoto Norcatun, KS 67653*
Business Telephone *(785)*

CHAIRPERSON

Name *Gary L. Anthony* Home Telephone *(785) 693-4431*

Mailing Address (Street, City, State, Zip Code) *101 S. Desoto PO Box 29 Norcatun KS 67653* Business Telephone *(785) 693-4431*

TREASURER

Name *Terry L. Keahey* Home Telephone *(785) 475-8993*

Mailing Address (Street, City, State, Zip Code) *310 E Maple St Oberlin KS 67749* Business Telephone *(785) 475-8993*

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."

7-10-2008
(Date)

Gary Anthony
(Signature of Chairperson)