

# STATEMENT OF ORGANIZATION

## FOR 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

DOUGLAS COUNTY REPUBLICAN CENTRAL COMMITTEE

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

PO BOX 3196 LAWRENCE, KS 66046

Business Telephone

( )

CHAIRPERSON

Name

RICHARD TODD

Home Telephone

( 785 ) 691-5557

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

PO BOX 1042 LAWRENCE, KS 66044

Business Telephone

( 913 ) 724-1080

TREASURER

Name

STEVE WARE

Home Telephone

( 785 ) 865-4148

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

1013 BILTMORE DRIVE, LAWRENCE, KS 66049

Business Telephone

( )

AFFILIATED OR CONNECTED ORGANIZATIONS

Name

N/A

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.

Primary interest of contributors is to elect Republicans as public office holders.

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."

9/20/2010

(Date)

(Signature of Chairperson)

## STATEMENT OF ORGANIZATION

RECEIVED

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

OCT 14 2009

KS Governmental Ethics Commission

(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 checked="" type="checkbox"/> Amended Statement

## COMMITTEE

(PLEASE TYPE OR PRINT)

Name Douglas County Republican Central Committee

Mailing Address (Street, City, State, Zip Code)  
NABusiness Telephone  
( NA )

## CHAIRPERSON

Name William E. Benso

Home Telephone  
( 785 ) 842-3575Mailing Address (Street, City, State, Zip Code)  
1803 Foxfire Drive, Lawrence, KS 66047Business Telephone  
( NA )

## TREASURER

Name James F. Lowe

Home Telephone  
( 785 ) 842-1484Mailing Address (Street, City, State, Zip Code)  
1029 Wildwood Drive, Lawrence, KS 66049Business Telephone  
( 785 ) 840-7872

## AFFILIATED OR CONNECTED ORGANIZATIONS

Name NA

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."

10/8/2009  
(Date)William E. Benso  
(Signature of Chairperson)

RECEIVED

## STATEMENT OF ORGANIZATION

JAN 12 2009

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

KS Governmental Ethics Commission

(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 checked="" type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

## COMMITTEE

(PLEASE TYPE OR PRINT)

Name

DOUGLAS COUNTY REPUBLICAN CENTRAL COMMITTEE (D.C.R.C.C.)

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

4700 W. 27<sup>TH</sup> ST. # PP 3 LAWRENCE KS. 66047 (785) 832-8700

Business Telephone

## CHAIRPERSON

Name

ROBERT L. ELLIOTT

Home Telephone

(785) 832-8700

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

4700 W. 27<sup>TH</sup> ST. # PP 3, LAWRENCE KS. 66047 (785) 766-5118

(C) Business Telephone

## TREASURER

Name

JAMES LOWE

Home Telephone

(785) 842-1484

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

1029 WILDWOOD DR. LAWRENCE KS. 66049

C Business Telephone

(785) 840-7872

## AFFILIATED OR CONNECTED ORGANIZATIONS

Names

SEE ATTACHED CIRCLED DOUGLAS COUNTY REPUBLICAN CLUBS

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."

01-10-09

(Date)

Robert L. Elliott

(Signature of Chairperson)