

FILED  
JUN 16 2008  
ROMEOURNBURGH  
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 checked="" type="checkbox"/> Amended Statement

### COMMITTEE (PLEASE TYPE OR PRINT)

Name	Jackson County Republican Central Cmte.		
Mailing Address (Street, City, State, Zip Code)	66436	Business Telephone	
421 New York Ave, PO Box 71, Holton (785) 364-3131			

### CHAIRPERSON

Name	Matt Taylor	Home Telephone	(785) 364-3241
Mailing Address (Street, City, State, Zip Code)	22301 Q Rd, Holton 66436	Business Telephone	(785) 364-3131

### TREASURER

Name	Connie Allen	Home Telephone	(785) 364-3738
Mailing Address (Street, City, State, Zip Code)	20849 P Rd, Holton 66436	Business Telephone	( ) ( )

### AFFILIATED OR CONNECTED ORGANIZATIONS

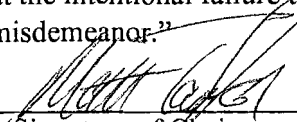
Name	None
Mailing Address (Street, City, State, Zip Code)	

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."

6/13/08  
(Date)

  
(Signature of Chairperson)