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FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES
SECRETARY OF STATE
LEAVENWORTH

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	Leavenworth County Democratz Central Committee	
Mailing Address (Street, City, State, Zip Code)	Business Telephone	
P.O. Box 56 Leavenworth, KS 66048	()	none current

CHAIRPERSON

Name	Home Telephone
Timothy Moran	(913) 250-0064
Mailing Address (Street, City, State, Zip Code)	Business Telephone
103 Willow, Lansing KS 66043	() none

TREASURER

Name	Home Telephone
Thomas Koch	(913) 682-3245
Mailing Address (Street, City, State, Zip Code)	Business Telephone
513 Olive St, Leavenworth, KS 66048	() none

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	Kansas 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."

JAN 3 2009
(Date)


(Signature of Chairperson)