

STATEMENT OF ORGANIZATION

RECEIVED

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

COMMITTEE (PLEASE TYPE OR PRINT)

Name	COFFEY COUNTY DEMOCRATIC CENTRAL COMMITTEE	
Mailing Address (Street, City, State, Zip Code)	PO Box 473 Lebo, KS 6654	
Business Telephone	()	

CHAIRPERSON

Name	Janet L Lewis	
Home Telephone	(620) 794-3138	
Mailing Address (Street, City, State, Zip Code)	PO Box 473 Lebo, KS 6654	
Business Telephone	()	

TREASURER

Name	Georgie Eggleston	
Home Telephone	(620) 964-2513	
Mailing Address (Street, City, State, Zip Code)	326 "E" St Le Roy, KS 66557	
Business Telephone	()	

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	Kansas Democratic Party	
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."

8-29-07
(Date)

Janet L Lewis
(Signature of Chairperson)