	FILED
STATEMENT OF ORGANIZATION FOR POLITICAL ACTION COMMITTEES AND PARTY CO	JUN 23 2014
(See Reverse Side For Instructions) This is a (check one) This is an (check one) Initial Statement Amended Statement	
COMMITTEE (PLEASE TYPE OR PRINT) Name Crawford County Democrats Mailing Address (Street, City, State, Zip Code) Business Telephone	
Manning Address (Street, City, State, Zip Code) Dusiness Telephone 202 5, Appleton Frontenac Ks () 666763 Home Telephone	
Lynn Grant (620) 308- Mailing Address (Street, City, State, Zip Code) Business Telephone 202 S Appleton Frontenac KS 66763 ()	
TREASURERNameHome TelephoneBabTowassiMailing Address (Street, City, State, Zip Code)(620)1807Colonial DVPittsburg Ks	
AFFILIATED OR CONNECTED ORGANIZATIONS	· · · ·
Mailing Address (Street, City, State, Zip Code) If not connected or affiliated with an organization, identify the trade, profession, or primary interv	est of the contributors.
SIGNATURE: "I declare that this statement has been examined by me and to the best of my knowledge as belief is true, correct and complete. I understand that the intentional failure to file this doc or intentionally filing a false document is a class A misdemeanor."	
<u>6/19/14</u> (Date) (Signature of Chairperson) Governmental Ethics Commission	

STATEMENT OF ORGANIZATION	JUL D 6 2010
FOR POLITICAL ACTION COMMITTEES AND PARTY COM	nmentai Einics Commi elon MITTEES
(See Reverse Side For Instructions)	
This is a (check one) Party Committee Political Action Committee	
This is an (check one) Initial Statement	
COMMITTEE (PLEASE TYPE OR PRINT)	
REALDFORD COUNTY REMOCRATIC PARTY	4
Mailing Address (Street, City, State, Zip Code) Business Telephone 412 West 1st Street (620) 237-	- 70-87
P. TSDURG KS 66762 CHAIRPERSON	
Name Beth M. Bradrick Home Telephone (620)231-	7087
Mailing Address (Street, City, State, Zip Code)Business Telephone(620)232	
TREASURER	
Name Robert Tomassi Home Telephone (Calo) 232	
Mailing Address (Street, City, State, Zip Code) 1807 C6LONIAL Drive (20)231-	4650
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name KANSAS Democrat Party	
Mailing Address (Street, City, State, Zip Code) P.D. Box 1914 100 petro KS 66601	
If not connected or affiliated with an organization, identify the trade, profession, or primary interest	t 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 docu	
or intentionally filing a false document is a class A misdemeanor."	
Date) (Signature of Chairperson)	-
Governmental Ethics Commission	Rev.2000