STATEMENT OF ORGANIZATION
FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES (See Reverse Side For Instructions)
(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 Jewell County Republican Party CC
Mailing Address (Street, City, State, Zip Code) PO Box 364 Mantento PS 66956 (785) 378 3408
CHAIRPERSON
Name Keith Role Home Telephone (785) 3783408
Mailing Address (Street, City, State, Zip Code) 66956 Business Telephone 225 W. Welster POBOX 364 Man Fato ()
TREASURER
Name Brandy Johnson (785) 647 5029
Brandy Johnson (785) 647 5029 Mailing Address (Street, City, State, Zip Code) Business Telephone 3205, Main Burr Oak 66936
AFFILIATED OR CONNECTED ORGANIZATIONS
Name
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."
(Date) (Signature of Chairperson)
Governmental Ethics Commission Rev.2000