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JAN 05 2017

KS Governmental Ethics Commission

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 type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Rice County Democratic Central Committee	
Mailing Address (Street, City, State, Zip Code)	109 East Ave N, Lyons KS 67554	Business Telephone (620) 509-2105

CHAIRPERSON

Name	M. Levi Morris	Home Telephone cell (620) 282-9402
Mailing Address (Street, City, State, Zip Code)	109 East Ave N, Lyons KS 67554	Business Telephone (620) 509-2105

TREASURER

Name	William L. Starr	Home Telephone cell (620) 797-3195
Mailing Address (Street, City, State, Zip Code)	201 S. Pioneer, Lyons KS	Business Telephone () n.a.

AFFILIATED OR CONNECTED ORGANIZATIONS

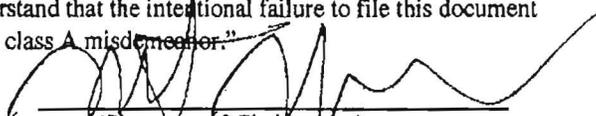
Name	Kansas Democratic Party	
Mailing Address (Street, City, State, Zip Code)	501 SE Jefferson St., Ste 30, Topeka, KS 66607	

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."

12-30-16
(Date)


(Signature of Chairperson)