## STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

10101	Ellion Ellon			
		(See Reverse Side For	Instructions)	_
	This is a (check one)	Party Committee	Political Action Committee	ž ;
	This is an (check one)	Initial Statement	Amended Statement	37.7312
COMMITTEE	3	(PLEASE TYPE O	R PRINT)	- 1 % Dominite sec
Name 7	epublic Cou	nty Democ.	ratics	
			Business Telephone 46939 (785) 527	- 0941
CHAIRPERSO	ON			
Name V	ck Leve	ndo fsky	Home Telephone (785) 527	- 0941
Mailing Addre	ess (Street, City, State bl- Rd Courtle	, Zip Code)	Business Telephone	
TREASURER	:			
Name 1	ony Str.	nad	Home Telephone ( 785 ) 527	-0163
Mailing Addre	ess (Street, City, State Nickel Pd	, Zip Code) Scandiu /(	Business Telephone	
AFFILIATED	OR CONNECTED C	RGANIZATIONS		
Name /	lone			
Mailing Addre	ess (Street, City, State,	, Zip Code)		_
fnot connected  Develop	or affiliated with an org	ganization, identify the tra	ade, profession, or primary interes	et of the contributors.
belief is true, co	his statement has been orrect and complete.		to the best of my knowledge and entional failure to file this document."	
5-27-1 (Date)	4			
		Signat	ure of Chairperson)	
3overnmental E	Ethics Commission			Rev.2000

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## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

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This is a (check one) Party Committee Political Action Committee	PILET				
This is an (check one) Initial Statement Amended Statement	JULTO				
Z sakt	JUL 10 2012				
COMMITTEE (PLEASE TIPE OR PRINT)					
Name Republic County Democratic Party	STATE				
Mailing Address (Street, City, State, Zip Code)  821 Nizee Hid Seadia (56966 )  Business Telephone					
CHAIRPERSON					
Name Nic Leven dotsky  Home Telephone  ()					
Mailing Address (Street, City, State, Zip Code) 1127 Granife Rd Republic KS 66964  Business Telephone ()					
TREASURER					
Name Tony Straad Home Telephone					
Mailing Address (Street, City, State, Zip Code)  821 Nizkel Rd Seerdia 1(566966 ())  Business Telephone					
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 frame trade, profession, or primary interest or profession trade, profession, or primary interest or profession trade, profession trad	e 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."					
7-1-12					
(Date) Signature of Chairperson)					
Governmental Ethics Commission	Rev.2000				