STATEMENT OF ORGANIZATION

SIA	TEMENT OF OR	COANIZATION				
FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES						
(See Reverse Side For Instructions) NOV 2 4 2020						
This is a (check one)	Party Committee	Political Action Committee				
This is an (check one)	Initial Statement	Amended Statement	SECRETARY OF STATE			
COMMITTEE	(PLEASE TYPE O	R PRINT)				
Name Ellis County Democratic (Central Committee					
Mailing Address (Street, City, State, Zip Code) Business Telephone 201 East 20th, Hays, KS 67601						
CHAIRPERSON		•				
Name Trina M. Powell	Home Telephone (785) 625-47	16				
Mailing Address (Street, City, State, Zip Code) 201 East 20th Hays, KS 67601 Business Telephone (785) 625-4716						
TREASURER						
Name		Home Telephone	0.10			
Ed Harbin Moiling Address (Street City, State	Zin Code)	(785) 650-1				
Mailing Address (Street, City, State, Zip Code) 303 East 19th Street, Hays, KS 67601 Business Telephone ()						
AFFILIATED OR CONNECTED (ORGANIZATIONS					
Name Kansas Democratic Party						
Mailing Address (Street, City, State, Zip Code) PO Box 1914, Topeka, KS 66601						
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 belief is true, correct and complete. or intentionally filing a false documed to the complete (Date).	I understand that the intent is a class A misdem	ntentional failure to file this do	ocument			
Governmental Ethics Commission	, ,	- ,	Rev.2000			

STATEMENT OF ORGANIZATION

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FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES, AB SECRETARY OF STATE

		(See I	Reverse Side For	Instru	ctions)	
	This is a (check one)	\checkmark	Party Committee		Political Action Committee	
	This is an (check one)		Initial Statement	\checkmark	Amended Statement	
COMMITTEE	3	(PI	LEASE TYPE O	R PRII	NT)	
Name Ellis C	County Democrats C	entra	l Committee			
	ess (Street, City, State n Street, Ellis, KS 67		Code)		Business Telephone	
CHAIRPERS	ON					
Name Jennii	fer Harmon				Home Telephone (785) 639-1549	
	ess (Street, City, State n Street, Ellis, KS 67		Code)		Business Telephone ()	
TREASURER						
Name					Home Telephone	
Ed Ha					(785) 650-1346	
Mailing Addre 303 W. 19	ess (Street, City, State th Street, Hays, KS	, Zip (6760	Code) 1		Business Telephone	
AFFILIATED	OR CONNECTED (ORGA	NIZATIONS			
Name Kansa	as Democratic Party	,				
1 -	ess (Street, City, State 914, Topeka, KS 666	-	Code)	,		
If not connected	or affiliated with an org	ganizat	tion, identify the t	ade, pr	ofession, or primary interest of	f the contributors.
			- National Control of the Control of			
SIGNATURE						
			•		best of my knowledge and nal failure to file this docume	ent
or intentionally	y filing a false docume	ent is a	a class A misdem	eanor.	,,	
09/01/2020			Jenn	ifer	Harmon Chairperson)	
(Date)			/(Signa	ture of	Chairperson)	
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JAN 102019 STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES							
(See Reverse Side For Instructions)							
	This is a (check one)	Party Committee	Political Action Com	mittee			
	This is an (check one)	Initial Statement	Amended Statement				
3							
COMMITTEE		(PLEASE TYPE O	R PRINT)				
Name Ellis C	ounty Democratic C	entral Committee					
	ss (Street, City, State, , Hays KS 67601	,Zip Code)	Business Tele (785) 62	phone 8-6162			
CHAIRPERSO	ON						
Name Henry	Schwaller IV		Home Telepho (785) 259	ne 0463			
			Business Tele (785) 620	phone 3-6162			
TREASURER							
Name			Home Telephor	1			
	er Harmon			9-1549			
717 W 10th	ss (Street, City, State, St Ellis KS 67637	Zip Code)	Business Tele	ohone			
AFFILIATED	OR CONNECTED O	RGANIZATIONS					
Name							
Mailing Addres	s (Street, City, State,	Zîp Code)					
f not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.							
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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."							
		11	Sum				
11-15-2 (Date)		(Signatu	re of Chairperson)				
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