STATEMENT OF ORGANIZATION	
STATEMENT OF ORGANIZATION FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES (See Reverse Side For Instructions) (See Reverse Side For Instructions) (See Reverse Side For Instructions)	
(See Reverse Side For Instructions)	
This is a (check one) X Party Committee	Political Action Committee
This is an (check one) Initial Statement	Political Action Committee Amended Statement
COMMITTEE (PLEASE TYPE OR PRINT)	
Name Coffey County Republican Central Commi	ttee
Mailing Address (Street, City, State, Zip Code)	Business Telephone
816 Cumberland Burlington, KS 66839	(620) 364-8027
CHAIRPERSON	
Name	Home Telephone
Don Small	(620) 364-8027
Mailing Address (Street, City, State, Zip Code) 816 Cumberlands Burlington, KS 66839	Business Telephone (620) 364-8027
ore Cumberlands Burlington, RS 66639	(620) 364-8027
TREASURER	
Name	Home Telephone
Garold Gilkison	(620) 364-8270
Mailing Address (Street, City, State, Zip Code)	Business Telephone
PO Box 421 Burlington, KS 66839	(620) 364-2200
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name	
Mailing Address (Street, City, State, Zip Code)	
If not connected or affiliated with an organization, identify the trade, pr	ofession, or primary interest of the contributors.
SIGNATURE: "I declare that this statement has been examined by me and to the belief is true, correct and complete. I understand that the intention or intentionally filing a false document is a class A misdemeanor."	nal failure to file this document
Governmental Ethics Commission	ኮ