DEC 2 1 2005 FROM FILING RECEIPTS AND EXPENDITURES REPORTS	
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- OFTAHY OF C	# ht
TYOUR COMMITTEE RECEIVED OR EXPENDED OR CONTRACTED TO EXPEND \$500 OR MORE IN CALLING YEAR 2005 OR IF YOUR COMMITTEE RECEIVED A CONTRIBUTION IN EXCESS OF \$50 FROM ANY ONE CONTRIBUTOR, THIS FORM MAY NOT BE USED.	AVE
CONTRIBUTOR, THIS FORM MAY NOT BE USED.	a have
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Instructions: This form may be used by the treasurer of any party committee or political action committee which qualifies for the execution of the second se	mption.
THIS AFFIDAVIT MUST BE FILED WITH THE SECRETARY OF STATE (120 SW 10 th , 1 st Floor Memorial Hall, TOPEKA, K 66612) PRIOR TO JANUARY 10, 2006. If a party or political action committee qualifies for this exemption, a Statement of Organ still must be filed and the treasurer must maintain the required records. (K.S.A. 25-4145)	ANSAS nization
PLEASE PRINT OR TYPE	
A. Name of Committee	
Address Rt. 2 City Hoxie, Kansas Zip Code 67740	
Telephone (785) 675-3550	
B. Name of TreasurerDon_DRowlison	
Address <u>Rt. 1, Box 57 M</u> City <u>Studley, Kansas</u> Zip Code <u>67740</u>	
Home Telephone (785) 627-3725 Business Telephone (785) 627- 5866	
C. Affidavit;	
State of Kansas)	
County of Sheridan)	
I,	
Republiscan Central Committee do swear (or affirm) that:	
(Name of Party or Political Action Committee)	
1. The information in Items A and B above is true and correct;	
2. In the non-election year to which this affidavit applies, the above party or political action committee expended or contra	acted to
 expend, an aggregate amount or value of less than five hundred dollars (\$500); In the non-election year to which the affidavit applies, the above party or political action committee received contributions. 	tions in
an aggregate amount or value of less than five hundred dollars (\$500);	
4. In the non-election year to which this affidavit applies, the above party or political action committee received no contrib	utions
in an aggregate amount or value in excess of fifty dollars (\$50) from any one contributor.	
V La VIII La Via	
(Date) (Signature of Treasurer)	
the icina	
Subscribed and sworn to (affirmed) before me this day of day of day of 0, 2005	
BUNDEL. TICE CLUMME A SILL	
My Appt. Expires 92309	
(Sear) My Appointment Expires Aent 23, 2089	
Governmental Ethics Commission Rev. 2000	
