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# STATEMENT OF ORGANIZATION

## POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

COPY

Governmental Ethics Commission  
109 WEST 9TH STREET  
TOPEKA, KANSAS 66612

This is a (check one)	<input checked="" type="checkbox"/> Party Committee	<input type="checkbox"/> Political Action Committee
This is an (check one)	<input checked="" type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

### COMMITTEE (PLEASE TYPE OR PRINT)

Name <b>REPUBLICAN PARTY CENTRAL COMMITTEE OF STEVENS COUNTY</b>	
Mailing Address (Street, City, State, Zip Code) <b>209 E 6th St., Hugoton, KS 67951</b>	Business Telephone <b>( 620 ) 544-4333</b>

### CHAIRPERSON

Name <b>ERICK NORDLING</b>	Home Telephone <b>( 620 ) 544-4647</b>
Mailing Address (Street, City, State, Zip Code) <b>209 E 6th St., Hugoton, KS 67951</b>	Business Telephone <b>( 620 ) 544-4333</b>

### TREASURER

Name <b>NANCY JOHNSON</b>	Home Telephone <b>( 620 ) 544-4068</b>
Mailing Address (Street, City, State, Zip Code) <b>604 JESSICA LN., HUGOTON, KS 67951</b>	Business Telephone <b>( )</b>

### AFFILIATED OR CONNECTED ORGANIZATIONS

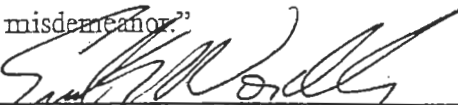
Name <b>REPUBLICAN PARTY OF KANSAS</b>
Mailing Address (Street, City, State, Zip Code) <b>2025 SW Gage Blvd, Topeka, KS 66604</b>

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."

8/31/06  
(Date)

  
(Signature of Chairperson)