| 1 | RECEIVED | | | | | | | |
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| | JAN 20 2023 SCOTT SCHWAB SECRETARY OF STATE SECRETARY OF STATE FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES | | | | | | | |
| | | | | | | | | |
| | (See Reverse Side For Instructions) This is a (check one) Image: Party Committee This is an (check one) Initial Statement Initial Statement Image: Amended Statement | | | | | | | |
| | COMMITTEE (PLEASE TYPE OR PRINT) | | | | | | | |
| | Name Anderson County Republican Central Committee | | | | | | | |
| 1 6.10 | Mailing Address (Street, City, State, Zip Code)Business TelephoneP.O. Box 409, Garnett, Ks., 66032(785) | | | | | | | |
| | CHAIRPERSON | | | | | | | |
| | NameHome TelephoneDane Hicks(785) 304-3870 | | | | | | | |
| | Mailing Address (Street, City, State, Zip Code)Business Telephone27651 NE 2000 Road, Greeley, Ks., 66033(785) | | | | | | | |
| | TREASURER | | | | | | | |
| | Name Home Telephone Jeremy DuPont (785) 418-5675 | | | | | | | |
| | Mailing Address (Street, City, State, Zip Code)Business Telephone32867 NE Norton Road, Garnett, Ks., 66032(620) | | | | | | | |
| | 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 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." | | | | | | | |
| - | 1-17-2023 (Date) (Signature of Chairperson) | | | | | | | |
| (| Governmental Ethics Commission Rev.2000 | | | | | | | |

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| FO | R POLITI | CAL ACTIO | N COMMITT | EES ANT |) PARTY | COMM | TALE |

| STATEMENT OF ORGANIZATION | NECENED |
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| FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTE | ES OIR |
| (See Reverse Side For Instructions) | S Commissio |
| This is a (check one) Party Committee Political Action Committee | " nissio |
| This is an (check one) Initial Statement Amended Statement | 1 |
| COMMITTEE (PLEASE TYPE OR PRINT) | |
| Name ANDERSON CO. REPUBLICAN CENTIRAL COMMI | TTEE |
| Mailing Address (Street, City, State, Zip Code) Pio Box 409 CARNETT KS (4032) 785-244 | 3-3121 |
| CHAIRPERSON | |
| Name DANE HICKS Home Telephone (785) 304-3870 | 2 |
| Mailing Address (Street, City, State, Zip Code) 27651 NEZCEO Rd ConFELEY, KS, 60033 312 | - 448- |
| TREASURER | |
| NamJULIE HELK HELK Home Telephone (7965) 418-4617 | |
| Mailing Address (Street, City, State, Zip Code) 21659 NW 1650 Rd, GARNETT, KS, (6032) 795-446- | 6541 |
| AFFILIATED OR CONNECTED ORGANIZATIONS | · |
| Name KANSAS REPUBLICAN PARTY | |
| Mailing Address (Street, City, State, Zip Code) Pro, BOX 41157, TOPEKA, KS, 66004 | |
| If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the con | ntributors. |
| | |
| 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 (Date) (Signature of Chairperson) | |
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