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STATEMENT OF ORGANIZATION	NOV 21 2022	
SCOTT SCHWAB SECRETARY OF STATE FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES		
(See Reverse Side For Instructions)		
This is a (check one) 🖌 Party Committee Political Action Committee		
This is an (check one) Initial Statement M Amended Statement		
COMMITTEE (PLEASE TYPE OR PRINT)		
Name Rice County Republican Central Committee		
Mailing Address (Street, City, State, Zip Code) Ks 67579 Business Telephone 6000		
CHAIRPERSON		
Name Bob Booth Home Telephone (620) 278	- 6000	
Mailing Address (Street, City, State, Zip Code) POBOX 252, Sterling KS 6757 (2)		
TREASURER		
Name Beverly Schottler (620)894-0120		
Mailing Address (Street, City, State, Zip Code) Business Telephone		
1550 Avenue G, Lyons, KS 67554 ()		
AFFILIATED OR CONNECTED ORGANIZATIONS		
Name Kunsus Republican Party		
Mailing Address (Street, City, State, Zip Code)		
800 SW Jackson St. Suite/120, Topeka, KS66612		
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."		
11/16/2022 Bob Booth		
$\frac{11/10/2022}{\text{(Date)}} \qquad $		
Governmental Ethics Commission	ge Rev.2000	

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	NOV 162018	
STATEMENT OF ORGANIZATION	KRIS W. KOBACH SECRETARY OF STATE	
FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES		
(See Reverse Side For Instructions)		
This is a (check one) Party Committee Political Action Committee		
This is an (check one) Initial Statement Amended Statement		
COMMITTEE (PLEASE TYPE OR PRINT)		
Name RicE County Republicph Central Committee		
Name RicE County Republican Central Committee Mailing Address (Street, City, State, Zip Code) P.O. Dox 287 Lyons Ks 67554 620 509-7102		
CHAIRPERSON		
Name PAMELA J. MINIX Home Telephone (620) 509	1-7102	
Mailing Address (Street, City, State, Zip Code) P.O. Box 287 LYONS, KS 67554 (Section 1997)		
TREASURER		
Name Beverly Schottler (620)894	-0120	
Mailing Address (Street, City, State, Zip Code) 1550 Avenue G Lyons, KS 67554)		
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 a belief is true, correct and complete. I understand that the intentional failure to file this do or intentionally filing a false document is a class A misdemeanor."		
<u>(Date)</u> <u>(Date)</u> <u>(Signature of Chairperson)</u>	<u>, </u>	
Governmental Ethics Commission	Rev.2000	