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SCOTT SCHWAB  
SECRETARY OF STATE

# STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

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

### COMMITTEE (PLEASE TYPE OR PRINT)

Name	Geary County Republican Central Committee	
Mailing Address (Street, City, State, Zip Code)	702 Wheatland Dr	
Business Telephone	( 785 ) 375 7395	

### CHAIRPERSON

Name	Kathy Tremont	
Home Telephone	( 785 ) 375 7395	
Mailing Address (Street, City, State, Zip Code)	702 Wheatland Dr	
Business Telephone	( )	

### TREASURER

Name	Kurtis J Teal	
Home Telephone	( 785 ) 209 2238	
Mailing Address (Street, City, State, Zip Code)	1422 Spring Valley Dr	
Business Telephone	( )	

Spring Hill

### 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.

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### 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."

3/02/2023  
(Date)

Kathy Tremont  
(Signature of Chairperson)