

[Print this form](#) or [Go Back](#)



**Campaign Finance
Statement of Organization
For Political Action Committees
And Party Committees**

Governmental Ethics Commission
901 S. Kansas Ave.
Topeka, KS 66612
Office (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is a (Check one) **Party Committee** **PAC**

This is an (Check one) **Initial Appointment** **Amended Statement**

Committee

Name: **Sherman Co. Republican Central Committee**

Address: **320 Rd. 64**

Address2:

City: **Kanorado** State: **KS** Zip: **67741**

Business Phone:

Email Address:

Chairperson

Name: **Karen Hooker**

Address: **320 Rd. 64**

Address2:

City: **Kanorado** State: **KS** Zip: **67741**

Home Telephone: Business Phone:

Email Address: **kshooker@st-tel.net**

Treasurer

Name: **Becky Purvis**

Address: **1205 Rd 55**

Address2:

City: **Goodland** State: **KS** Zip: **67735**

Home Telephone: Business Phone:

Email Address: **pdoublebar@st-tel.net**

**Affiliated or
Connected
Organizations**

Name: **Kansas Republican Party**

Address: **800 SW Jackson St., Suite 1100**

Address2:

City: **Topeka** State: **KS** Zip: **66612**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

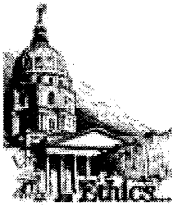
I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **1/10/2023 2:22:59 PM** Signature of Chairperson: **Karen Hooker**

[Print this form](#) or [Go Back](#)

[Print this form](#) or [Go Back](#)



**Campaign Finance
Statement of Organization
For Political Action Committees
And Party Committees**

Governmental Ethics Commission
901 S. Kansas Ave.
Topeka, KS 66612
Office (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is a (Check one) **Party Committee** **PAC**

This is an (Check one) **Initial Appointment** **Amended Statement**

Committee Name: **Sherman Co. Republican Central Committee**

Address: **320 Rd. 64**

Address2:

City: **Kanorado** State: **KS** Zip: **67741**

Business Phone:

Email Address:

Chairperson Name: **Karen Hooker**

Address: **320 Rd. 64**

Address2:

City: **Kanorado** State: **KS** Zip: **67741**

Home Telephone: Business Phone:

Email Address: **kshooker@st-tel.net**

Treasurer Name: **Rhonda Wheat**

Address: **5705 Rd. 23**

Address2:

City: **Goodland** State: **KS** Zip: **67735**

Home Telephone: Business Phone:

Email Address: **rwheat56@yahoo.com**

**Affiliated or
Connected
Organizations** Name: **Kansas Republican Party**
Address: **800 SW Jackson St., Suite 1100**
Address2:

City: **Topeka** State: **KS** Zip: **66612**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

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.

Executed on:

Date: **1/24/2022 6:35:13 PM** Signature of Chairperson: **Karen Hooker**

[Print this form](#) or [Go Back](#)