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

Governmental Ethics Commission  
109 W. 9th, Suite 504  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
[www.kansas.gov/ethics](http://www.kansas.gov/ethics)

This is a (Check one)  Party Committee  PAC

This is an (Check one)  Initial Appointment  Amended Statement

**Committee**

Name: **Kansas Republican Victory Fund State PAC**

Address: **PO Box 626**

City: **Topeka** State: **KS** Zip: **66601**

Business Phone: **7852700365**

Email Address: **krvf.treasurer@yahoo.com**

**Chairperson**

Name: **Jacob Swisher**

Address: **PO Box 626**

City: **Topeka** State: **KS** Zip: **66601**

Home Telephone: **9136386292** Business Phone: **9136386292**

Email Address: **krvf.treasurer@yahoo.com**

**Treasurer**

Name: **Merilee Martin**

Address: **PO Box 626**

City: **Topeka** State: **KS** Zip: **66601**

Home Telephone: **7856330240** Business Phone: **7856330240**

Email Address: **krvf.treasurer@yahoo.com**

**Affiliated or Connected Organizations**

Name: **Kansas Republican Assembly Inc**

Address: **PO Box 626**

City: **Topeka** State: **KS** Zip: **66601**

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: **7/27/2008 4:10:40 PM** Signature of Chairperson: **Jacob Swisher**

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FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES  
RON THOMPSON  
SECRETARY OF STATE

# STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input type="checkbox"/> Party Committee	<input checked="" 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	Kansas Republican Victory Fund: State PAC	
Mailing Address (Street, City, State, Zip Code)	Business Telephone	
PO Box 626 Topeka, KS 66601	( 785 )	270-0365

CHAIRPERSON

Name	Home Telephone
Jacob Swisher	( 913 ) 638-6292
Mailing Address (Street, City, State, Zip Code)	Business Telephone
PO Box 626 Topeka, KS 66601	( 913 ) 638-6292

TREASURER

Name	Home Telephone
Merilee K. Martin	( 785 ) 633-0240
Mailing Address (Street, City, State, Zip Code)	Business Telephone
PO Box 626 Topeka, KS 66601	( 785 ) 633-0240

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	Kansas Republican Assembly, Inc.
Mailing Address (Street, City, State, Zip Code)	
PO Box 626 Topeka, KS 66601	

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."

6/17/06  
(Date)

Jacob Swisher  
(Signature of Chairperson)