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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

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

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

Committee

Name: **Leavenworth County Republicans for Responsible Government**

Address: **13921 166th St**

Address2:

City: **Bonner Springs** State: **KS** Zip: **66012**

Business Phone: **(913) 526-0896**

Email Address: **barbpaulus1@yahoo.com**

Chairperson

Name: **Barbara Paulus**

Address: **13921 166th St**

Address2:

City: **Bonner Springs** State: **KS** Zip: **66012**

Home Telephone: **(913) 526-0896** Business Phone: **(913) 526-0896**

Email Address: **barbpaulus1@yahoo.com**

Treasurer

Name: **Barbara Paulus**

Address: **13921 166th St**

Address2:

City: **Bonner Springs** State: **KS** Zip: **66012**

Home Telephone: **(913) 526-0896** Business Phone: **(913) 526-0896**

Email Address: **barbpaulus1@yahoo.com**

Affiliated or Connected Organizations

Name:

Address:

Address2:

City: State: Zip:

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: **10/29/2012 3:33:11 PM** Signature of Chairperson: **Barbara E. Paulus**

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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 checked="" type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name **Leavenworth County Republicans for Responsible Government**

Mailing Address (Street, City, State, Zip Code)
13921 166th St., Bonner Springs, KS 66012

Business Telephone
(913) 526-0896

CHAIRPERSON

Name **Barbara Paulus**

Home Telephone
(913) 422-7702

Mailing Address (Street, City, State, Zip Code)
13921 166th St., Bonner Springs, KS 66012

Business Telephone
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TREASURER

Name **Barbara Paulus**

Home Telephone
(913) 422-7702

Mailing Address (Street, City, State, Zip Code)
13921 166th St., Bonner Springs, KS 66012

Business Telephone
(913) 526-0896

AFFILIATED OR CONNECTED ORGANIZATIONS

Name **None**

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.

Republican Values

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 or intentionally filing a false document is a class A misdemeanor."

02/17/2012
(Date)

Barbara Paulus
(Signature of Chairperson)

