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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: Olathe Republican Central Committee

Address: 1137 E. Frontier Dr.

Address2:

City: Olathe State: KS Zip: 66062 Business Phone: (913) 302-5955

Email Address: steverobyn27@sbcglobal.net

Chairperson Name: David Lightner

Address: 11728 W. 146th St.

Address2:

City: Olathe State: KS Zip: 66062

Home Telephone: (913) 909-0011 Business Phone: (913) 909-0011

Email Address: dlight3344@aol.com

Treasurer Name: Robyn Essex

Address: 1137 E. Frontier Dr.

Address2:

City: Olathe State: KS Zip:66062

Home Telephone: (913) 302-5955 Business Phone: (913) 302-5955

Email Address: steverobyn27@sbcglobal.net

Affiliated or Connected

Name: Political Action Committee

Connected Address: Organizations

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: 10/15/2014 2:38:10 PM Signature of Chairperson: Robyn Essex

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STATEMENT OF ORGANIZATION

FILED

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FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES KRISTIN WUKULACH SESTERFRANKVINGTATETE

| | (See Reverse Side For Instructions) | | | | |
|----------------------------------|---|-----------------------------|--|-------------------------------|--|
| | This is a (check one) | Party Committee | Political Action Com | mittee | |
| | This is an (check one) | Initial Statement | ✓ Amended Statement | | |
| | | | | | |
| COMMITTEE (PLEASE TYPE OR PRINT) | | | | | |
| Name Olathe | Republican Centra | l Committee | _ | | |
| | ss (Street, City, State, 46 St., Olathe, KS 6 | | Business Tele (913) 909 | phone 9-0011 | |
| CHAIRPERSO |)N | | | | |
| Name David | L. Lightner | | Home Telephor (913) 89 | ne 7-2244 | |
| | ss (Street, City, State, 46th St., Olathe, KS | | Business Tele (913) 909 | phone 9-0011 | |
| TREASURER | | | | | |
| Name Robyn | R. Essex | | Home Telephor | ne 64-8091 | |
| Mailing Addre | ss (Street, City, State, ontier Dr., Olathe, K | | Business Tele | | |
| AFFILIATED | OR CONNECTED O | RGANIZATIONS | | | |
| Name | | | | | |
| Mailing Addre | ss (Street, City, State, | Zip Code) | | | |
| If not connected of | or affiliated with an org | anization, identify the tra | ade, profession, or primary | interest of the contributors. | |
| belief is true, co | his statement has been orrect and complete. 1 | - | to the best of my knowle rentional failure to file the | _ | |
| (Date) Governmental F | thics Commission | (Signat | ure of Charperson) | Rev.2000 | |