Print this form or Go Back

	Campaign FinanceGovernmental Ethics CommissionStatement of Organization901 S. Kansas Ave.For Political Action CommitteesTopeka, KS 66612And Party CommitteesFax (785) 296-4219Fax (785) 296-2548ethics.kansas.gov				
	This is a (Check one) Party Committee PAC				
Committee	This is an (Check one) Initial Appointment Amended Statement Name: Conservative Republicans of Southern Johnson County Address: P.O. Box 23361 Address2:				
	City: Overland Park State: KS Zip: 66283				
	Business Phone: (913) 980-8186 Email Address: gacromer@aol.com				
Chairperson	Name: Greg Cromer				
Champerson	Address: 7527 West 140th St.				
	Address2: Unit 1314				
	City: Overland Park State: KS Zip: 66223				
	Home Telephone: Business Phone: (913) 980-8186				
	Email Address: gacromer@aol.com				
Treasurer	Name: Lester Sibert				
	Address: 15270 Oakmont St				
	Address2:				
	City: Overland Park State: KS Zip:66221				
	Home Telephone: (913) 897-7208 Business Phone:				
	Email Address: jansibert@sbcglobal.net				
Affiliated or	Name: Conservative Republicans of Southern Johnson County				
Connected Organizations	Address: PO Box 23361				
	Address2:				
	City: Overland Park State: KS Zip: 66283				
	If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors. Conservative political causes in Republican politics.				
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: 2/16/2017 10:48:22 AM Signature of Chairperson: Greg A. Cromer

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 109 W. 9th, Suite 504 Topeka, KS 66612 Phone (785) 296-4219 Fax (785) 296-2548 www.kansas.gov/ethics

AND PERMICS.	
	This is a (Check one) Party Committee PAC
	This is an (Check one) Initial Appointment Amended Statement
	Name: Conservative Republicans of Southern Johnson County
	Address: P.O. Box 23361
	Address2:
	City: Overland Park State: KS Zip: 66283
	Business Phone: (913) 980-8186
	Email Address: gacromer@aol.com
	Name: Greg Cromer
	Address: 7527 West 140th St.
	Address2: Unit 1314
	City: Overland Park State: KS Zip: 66223
	Home Telephone: Business Phone: (913) 980-8186
	Email Address: gacromer@aol.com
	Name: James Nelson
	Address: 1413 S Sheridan Bridge Cir.
	Address2:
	City: Olathe State: KS Zip:66062
	Home Telephone: Business Phone:
	Email Address: chair@crsjc.org
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. Conservative political causes in Republican politics.
	this statement has been examined by me and to the best of my knowledge and belief is true, correct I understand that the intentional failure to file this document or intentionally filing a false document

Executed on:

Date: 1/10/2017 11:52:53 AM Signature of Chairperson: Greg A. Cromer

Print this form or Go Back

	STA	TEMENT OF O	RGANIZATION	
FOR PO	LITICAL ACT	ION COMMITT	EES AND PARTY CON	
		(See Reverse Side Fo	or Instructions)	FILED
[This is a (check one) This is an (check one)	Party Committee	Political Action Committee	MAR 1 7 2015
COMMITTEE		(PLEASE TYPE (DR PRINT)	SECRETARY OF STATE
Name CONS	ELVATIVE REP	uttions of So	untern Johnson Co	NUN TY
Mailing Addres Po 尼ッ	ss (Street, City, State 23361 OVer	e, Zip Code) Linio Park, LS 662	Business Telephone 83-334 (913) 990-	81 86
CHAIRPERSO				
Name	REG A, CRO	omer.	Home Telephone (913)980-31	84
Mailing Addres	ss (Street, City, State	e, Zip Code)	Business Telephone PARK (N (913) 9 80 - 9 26 223 (913) 9 80 - 9	184
TREASURER				
Name	ES NELSON)	Home Telephone $(814)439$ -	1738
	SS (Street, City, State		Business Telephone 66062 (816) 438 -	(738
	OR CONNECTED (•		
Name		ORGANIZATIONS		
Mailing Addres	ss (Street, City, State	e, Zip Code)		
		ganization, identify the EVATIVE_ こAモS	trade, profession, or primary interest ϵs	st of the contributors.
belief is true, co or intentionally $3 - 14 - 19$	rrect and complete. filing a false docume	I understand that the i ent is a class A misden	ugo Cum	
(Date)		✓ (Signa	ature of Chairperson)	
Governmental Ef	thics Commission			Rev.2000