STATEMENT OF ORGANIZATION

FILED

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES 2019

SCOTT SCHWAB

Rev.2000

	(See Reverse Side For Instructions)			
	This is a (check one)	Party Committee	Political Action C	ommittee
	This is an (check one)	Initial Statement	Amended Statem	ent
COMMITTEE	<u> </u>	(PLEASE TYPE OF	R PRINT)	
Name Northy	west Johnson Count	y Republicans		
Mailing Address (Street, City, State, Zip Code) PO Box 861121, Shawnee, KS 66218			Business Telephone (913) 499-0211	
CHAIRPERSO	ONNC			
Name Tony (Gillette		Home Telep (913) 2	hone 230-1608
	ess (Street, City, State, 0th Terrace, Shawne		Business To (913)	elephone 199-0211
TREASURER				
Name Diane	Macheers		Home Telep	hone 485-6571
Mailing Addre 21704 W. 5	ess (Street, City, State, 57th Terrace, Shawr	Zip Code) nee, KS 66218	Business T	elephone
AFFILIATED	OR CONNECTED O	RGANIZATIONS		
Name				
Mailing Addre	ess (Street, City, State,	Zip Code)		
If not connected	or affiliated with an org	anization, identify the tra	ade, profession, or prim	ary interest of the contributors.
belief is true, co	this statement has been orrect and complete. I	n examined by me and understand that the int nt is a class A misdeme	entional failure to file	
<u>4-24-</u> (Date)		(Signat	are of Chairperson)	tte
Governmental E	Ethics Commission	U		Rev.2000