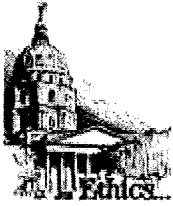


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Campaign Finance Statement of Organization For Political Action Committees And Party Committees

Governmental Ethics Commission
901 S. Kansas Ave.
Topeka, KS 66612
Office (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is a (Check one) Party Committee PAC

This is an (Check one) Initial Appointment Amended Statement

Committee Name: **Kansas Republican Values Fund**
Address: **P.O. Box 5976**
Address2:
City: **Topeka** State: **KS** Zip: **66605**
Business Phone: **(785) 640-2212**
Email Address: **dhineman@st-tel.net**

Chairperson Name: **Donald Hineman**
Address: **116 S Longhorn Road**
Address2:
City: **Dighton** State: **KS** Zip: **67839**
Home Telephone: **(620) 397-3242** Business Phone: **(620) 397-3242**
Email Address: **dhineman@st-tel.net**

Treasurer Name: **Donald Hineman**
Address: **116 S Longhorn Road**
Address2:
City: **Dighton** State: **KS** Zip: **67839**
Home Telephone: **(620) 397-3242** Business Phone: **(620) 397-3242**
Email Address: **dhineman@st-tel.net**

Affiliated or Connected Organizations Name: **N/A**
Address:
Address2:
City: State: Zip:

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.
To preserve and protect traditional Republican values

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: **6/13/2020 1:06:53 PM** Signature of Chairperson: **Donald J. Hineman**

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JAN 13 2020

KS Governmental Ethics Commission

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a check for:	<input type="checkbox"/> Party Committee	<input checked="" type="checkbox"/> Political Action Committee
This is an check for:	<input type="checkbox"/> Individual	<input type="checkbox"/> Corporate/Institutional

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Kansas Republican Values Fund	
Mailing Address (Street, City, State, Zip Code)	Business Telephone	
PO Box 5976 Topeka KS 66605	(785) 640-2212	

CHAIRPERSON

Name	Home Telephone
Susie Swanson	(785) 640-2212
Mailing Address (Street, City, State, Zip Code)	Business Telephone
PO Box 5976 Topeka KS 66605	()

TREASURER

Name	Home Telephone
Susie Swanson	(785) 640-2212
Mailing Address (Street, City, State, Zip Code)	Business Telephone
PO Box 5976 Topeka KS 66605	()

AFFILIATED OR CONNECTED ORGANIZATIONS

Name
Mailing Address (Street, City, State, Zip Code)

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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."

1-10-2020
(Date)

Susie Swanson
(Signature of Chairperson)

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JUN 26 2018

KS Governmental Ethics Commission

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 Values Fund

Mailing Address (Street, City, State, Zip Code)
PO Box 5976, Topeka, KS 66605

Business Telephone
(785) 640-2212

CHAIRPERSON

Name J. Robert Brookens

Home Telephone
()

Mailing Address (Street, City, State, Zip Code)
PO Box 5976, Topeka, KS 66605

Business Telephone
(785) 640-2212

TREASURER

Name J. Robert Brookens

Home Telephone
()

Mailing Address (Street, City, State, Zip Code)
PO Box 5976, Topeka, KS 66605

Business Telephone
(785-) 640-2212

AFFILIATED OR CONNECTED ORGANIZATIONS

Name N/A

Mailing Address (Street, City, State, Zip Code)

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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."

6-26-18
(Date)


(Signature of Chairperson)