

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED  
JAN 21 2025  
SCOTT SCHWAB  
SECRETARY OF STATE

(See Reverse Side For Instructions)

This is a (check one)  Party Committee  Political Action Committee  
 Initial Statement  Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name Fourth District Republican Committee

Mailing Address (Street, City, State, Zip Code)  
12799 SW 92nd Ter, Andover, KS 67002

Business Telephone  
( 316 ) 573-9987

CHAIRPERSON

Name Debbie Luper

Home Telephone  
( )

Mailing Address (Street, City, State, Zip Code)  
12799 SW 92nd Ter, Andover, KS 67002

Business Telephone  
( 316 ) 573-9987

Email: *debbie.luper@gmail.com*

TREASURER

Name Kurt Fairchild

Home Telephone  
( )

Mailing Address (Street, City, State, Zip Code)  
459 NW 10th Ave, St. John, KS 67576

Business Telephone  
( 620 ) 546-5844

Email: *Kurt@fairchildfarms.com*

AFFILIATED OR CONNECTED ORGANIZATIONS

Name Kansas Republican Party

Mailing Address (Street, City, State, Zip Code)  
PO Box 14004, Lenexa, KS 66285

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

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."

1/4/2025  
(Date)

*Debbie Luper*  
(Signature of Chairperson)

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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: **Fourth District Republican Committee**

Address: **12799 SW 92nd Terrace**

Address2:

City: **Andover** State: **KS** Zip: **67002**

Business Phone: **(316) 573-9987**

Email Address: **debbie.luper@gmail.com**

**Chairperson** Name: **Debbie Luper**

Address: **12799 SW 92nd Terrace**

Address2:

City: **Andover** State: **KS** Zip: **67002**

Home Telephone: **(316) 573-9987** Business Phone:

Email Address: **debbie.luper@gmail.com**

**Treasurer** Name: **Kurt Fairchild**

Address: **459 NW 10th Ave**

Address2:

City: **Saint John** State: **KS** Zip: **67576**

Home Telephone: **(620) 546-5844** Business Phone:

Email Address: **kurt@fairchildfarms.com**

**Affiliated or** Name: **Kansas Republican Party**

**Connected** Address: **P.O. Box 4157**

**Organizations** Address2:

City: **Topeka** State: **KS** Zip: **66604**

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**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: **12/29/2020 6:33:19 PM** Signature of Chairperson: **Debbie Luper**

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