	_\
	,
* J/1/0	
NON 2 4	
/40	17

STATEMENT OF ORGANIZATION
FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES
(See Reverse Side For Instructions)
This is a (check one)
This is an (check one)
COMMITTEE (PLEASE TYPE OR PRINT)
Name Edwards County Republican Party
Mailing Address (Street, City, State, Zip Code)  3167 20th Que Offerle KS (620) 659-2664
CHAIRPERSON
Name Janet Wetzel Home Telephone (620) 659-2664
Mailing Address (Street, City, State, Zip Code)  Business Telephone  2167 20
TREASURER
Name Karen Gilkey Home Telephone (620) 995-3613
Mailing Address (Street, City, State, Zip Code) PO BOX 134 Reloce KS (3519( )
AFFILIATED OR CONNECTED ORGANIZATIONS
Name
Mailing Address (Street, City, State, Zip Code)
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors
SIGNATURE: "I dealers that this statement has been examined by me and to the heat of my knowledge and
"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."
(Date) (Signature of Chairperson) ()

Governmental Ethics Commission

Rev.2000

RF	CEI	VF	ח
.,_	$\sim$ L	v	

SEP 1 6 2010

Rev.2000

## STATEMENT OF ORGANIZATION

RON THORNBURGH SECRETARY OF STATE

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)
This is a (check one)
This is an (check one) Initial Statement  Amended Statement
COMMITTEE (PLEASE TYPE OR PRINT)
Name Edwards County Republican Party
Mailing Address (Street, City, State, Zip Code)  Business Telephone  2167 20th Que. Office K5 67563 620 659 3664
CHAIRPERSON
Name Janet Wetzel Home Telephone (620)659-2664
Mailing Address (Street, City, State, Zip Code)  2167 20- Que Charle S (620) 357-4052
TREASURER
Name Karen Gilkey Home Telephone (620) 995-3613
Mailing Address (Street, City, State, Zip Code)  O 1307 134 Selpre 145 67519  Business Telephone
AFFILIATED OR CONNECTED ORGANIZATIONS
Name
Mailing Address (Street, City, State, Zip Code)
f not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributo
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."
(Date) (Signature of Chairperson)
Governmental Ethics Commission Rev.20

## STATEMENT OF ORGANIZATION

١	FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES  (See Reverse Side For Instructions)
	(See Reverse Side For Instructions)  DEC 1.4 2008  (See Reverse Side For Instructions)  Party Committee Political Action Committee
1	(See Reverse Side For Instructions)    Compared to the content of
l	THORNES Amended Statement  Amended Statement  Amended Statement
	Party Committee Political Action Committee  ROW THORNELL ATTENDED THIS is an (check one) Initial Statement Amended Statement  COMMITTEE (PLEASE TYPE OR PRINT)
	Name -
	Echwards County Kepublican Party  Mailing Address (Street, City, State, Zip Code) 67563 Business Telephone
I	Mailing Address (Street, City, State, Zip Code) 67563 Business Telephone  2167 20th Owe Office KS (620) 659-2664
	CHAIRPERSON
	Name Home Telephone
ı	Janet Wetzel (620)659-2664
	Mailing Address (Street, City, State, Zip Code)  2167 20th Que Ollwle KS (620)659-2664
	TREASURER
l	Name, ) Home Telephone
ı	Karen (51/44) (620) 995-3613
-	Mailing Address (Street, City, State, Zip Code)  Business Telephone  PO BOX 134 Belore KS 107519 (620) (059 - 2188
	AFFILIATED OR CONNECTED ORGANIZATIONS
1	Name Kansas Republican Party
	Mailing Address (Street City State Zip Code)
l	2025 SW Gage Blvd. Topeka Ks 60604
	If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.
l	
	SIGNATURE:
l	"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."
l	
	(Date) (Signature of Chairperson)
	Governmental Ethics Commission Rev.2000