

RECEIVED

DEC 06 2010

SECRETARY OF STATE

### STATEMENT OF ORGANIZATION

### FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input checked="" type="checkbox"/> Party Committee	<input 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 Mitchell County Republican Central Committee

Mailing Address (Street, City, State, Zip Code) <u>P. O. Box 604, Beloit, KS 67420</u>	Business Telephone <u>( 785 ) 738-3506</u>
---	---

#### CHAIRPERSON

Name <u>Don W. Noah</u>	Home Telephone <u>( 785 ) 738-3136</u>
-------------------------	---

Mailing Address (Street, City, State, Zip Code) <u>PO Box 604 Beloit KS 67420</u>	Business Telephone <u>( 785 ) 738-3506</u>
--	---

#### TREASURER

Name <u>Charles Frodsham</u>	Home Telephone <u>( 785 ) 738-6538</u>
------------------------------	---

Mailing Address (Street, City, State, Zip Code) <u>321 N. Hersey, Beloit, KS 67420</u>	Business Telephone <u>( ) NA</u>
---	-------------------------------------

#### AFFILIATED OR CONNECTED ORGANIZATIONS

Name Kansas Republican Party

Mailing Address (Street, City, State, Zip Code)  
PO Box 4157 Topeka KS 66604

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."

12-03-2010  
(Date)

Don W. Noah  
(Signature of Chairperson)

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input checked="" type="checkbox"/> Party Committee	<input type="checkbox"/> Political Action Committee
This is an (check one)	<input checked="" type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

**FILED**  
 DEC 05 2008  
 ROW THORNBURGH  
 SECRETARY OF STATE

COMMITTEE

(PLEASE TYPE OR PRINT)

Name Mitchell County Republican Party

Mailing Address (Street, City, State, Zip Code) <u>921 N. Mill, Beloit, KS 67420</u>	Business Telephone <u>(785) 738-8087</u>
---	---

CHAIRPERSON

Name <u>Susan Concannon</u>	Home Telephone <u>(785) 738-3161</u>
-----------------------------	---

Mailing Address (Street, City, State, Zip Code) <u>921 N. Mill, Beloit, KS 67420</u>	Business Telephone <u>(785) 738-8087</u>
---	---

TREASURER

Name <u>Charles Frodsham</u>	Home Telephone <u>(785) 738-6538</u>
------------------------------	---

Mailing Address (Street, City, State, Zip Code) <u>320 N. Hersey, Beloit, KS 67420</u>	Business Telephone <u>( )</u>
---	----------------------------------

AFFILIATED OR CONNECTED ORGANIZATIONS

Name Kansas Republican Party

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 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."

11/19/08  
(Date)

Susan Concannon  
(Signature of Chairperson)