

# STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)



Party Committee



Political Action Committee

This is an (check one)



Initial Statement



Amended Statement

FILED

JAN 06 2011

SECRETARY OF STATE

### COMMITTEE

(PLEASE TYPE OR PRINT)

Name

Sedgwick County Republican Party

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

PO Box 47626, Wichita, KS 67202

Business Telephone

(316) 263-0550

### CHAIRPERSON

Name

Robert Dool

Home Telephone

(316) 734-1012

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

8225 E. 35th St. N. Wichita, KS 67226

Business Telephone

(316) 263-0550

### TREASURER

Name

Lisa C. Ritchie

Home Telephone

(316) 253-7606

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

7 Hampton, Wichita, KS 67206

Business Telephone

(316) 263-0550

### AFFILIATED OR CONNECTED ORGANIZATIONS

Name

KANSAS REPUBLICAN PARTY

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

PO Box 4157 TOPEKA, KS 66604

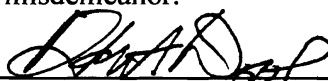
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

### 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."

1-3-11

(Date)



(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 type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

## COMMITTEE

(PLEASE TYPE OR PRINT)

Name Sedgwick County Republican Party

Mailing Address (Street, City, State, Zip Code)  
P.O. box 47626, Wichita, KS 67201Business Telephone  
( 316 ) 263-0550

## CHAIRPERSON

Name Kelly Arnold

Home Telephone  
( 316 ) 648-5002Mailing Address (Street, City, State, Zip Code)  
11615 W. 17th St, Wichita, KS 67212Business Telephone  
( )

## TREASURER

Name Bob Aldrich

Home Telephone  
( 316 ) 644-7287Mailing Address (Street, City, State, Zip Code)  
1017 Compton, Wichita, KS 67212Business Telephone  
( )

## AFFILIATED OR CONNECTED ORGANIZATIONS

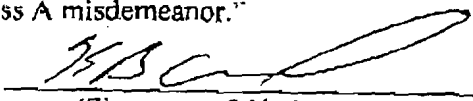
Name Kansas Republican Party

Mailing Address (Street, City, State, Zip Code)  
P.O. 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."

10-12-10  
(Date)  
(Signature of Chairperson)

FILED

DEC 16 2008

SETHORNBURGH  
FOR THE  
SECRETARY OF STATE

## STATEMENT OF ORGANIZATION

### FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)



Party Committee



Political Action Committee

This is an (check one)



Initial Statement



Amended Statement

#### COMMITTEE

(PLEASE TYPE OR PRINT)

Name

Sedgwick County Republican Central Committee

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

PO Box 47626

Business Telephone

(316) 283-0550

#### CHAIRPERSON

Name

Kelly Arnold

Home Telephone

(316) 648-5002

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

11615 W. 17th St. Wichita KS 67212

Business Telephone

#### TREASURER

Name

Jason Watkins

Home Telephone

(316) 461-8112

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

6525 W. Northwind Wichita KS 67205

Business Telephone

#### AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Kansas Republican Party

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

2025 SW Gase Blvd 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."

12-12-08

(Date)



(Signature of Chairperson)