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KRIS W. KOBACH
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 checked="" type="checkbox"/> Initial Statement | <input type="checkbox"/> Amended Statement |

COMMITTEE (PLEASE TYPE OR PRINT)

Name CHEROKEE COUNTY REPUBLICAN PARTY CENTRAL COMMITTEE

| | |
|---|--------------------|
| Mailing Address (Street, City, State, Zip Code) | Business Telephone |
| 1587 NW BETHLEHEM RD. COLUMBUS, KS 66725 | () |

CHAIRPERSON

| | |
|------------------|----------------|
| Name | Home Telephone |
| LORIE M. JOHNSON | () |

| | |
|---|--------------------|
| Mailing Address (Street, City, State, Zip Code) | Business Telephone |
| 1587 NW BETHLEHEM RD. COLUMBUS, KS 66725 | (620) 674-2180 |

TREASURER

| | |
|---------------|----------------|
| Name | Home Telephone |
| ANGELA RIPPEL | () |

| | |
|---|--------------------|
| Mailing Address (Street, City, State, Zip Code) | Business Telephone |
| 6694 NE BELLEVIEW RD. SCAMMON, KS 66773 | (620) 762-0068 |

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.
To promote Republican candidates in Cherokee County.

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."

10/3/12
(Date)

Lorie Johnson
(Signature of Chairperson)

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 12 2011

SECRETARY

COMMITTEE (PLEASE TYPE OR PRINT)

Name CHEROKEE COUNTY GOP

Mailing Address (Street, City, State, Zip Code) Business Telephone
1587 NW BETHLEHEM, COLUMBUS, KS, 66725 ()

CHAIRPERSON

Name LORIE JOHNSON Home Telephone
(620) 674-2180

Mailing Address (Street, City, State, Zip Code) Business Telephone
1587 NW BETHLEHEM, COLUMBUS, KS, 66725 ()

TREASURER

Name CONNIE MARTINS Home Telephone
(620) 856-3981

Mailing Address (Street, City, State, Zip Code) Business Telephone
603 EAST 19TH, BAXTER SPRINGS, KS, 66713 ()

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.
Contributions made are used to endorse Republican candidates and campaigns in Cherokee County.

SIGNATURE:

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1-10-11
(Date)

Lorie Johnson
(Signature of Chairperson)