STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)					FILED
	This is a (check one)	Party Committee	Politic	cal Action Committee	NOV 08 2012
	This is an (check one)	Initial Statement	X Ame	ended Statement	
					KRIS W. KOBACH SECRETARY OF STATE
COMMITTEE (PLEASE TYPE OR PRINT)					
Name Clay County Republican Party Central Committee					
Mailing Address (Street, City, State, Zip Code) 6743 - Business Telephone 859 Valleyview Rd. Clay Center, 125 (785) 463-5463					
CHAIRPERSO	•		<i>,</i>		
Name Ka	thy Martin			ome Telephone 785) 463-5	463
Mailing Address (Street, City, State, Zip Code) 67432 Business Telephone 859 Valley View Rd Clay Center, KS (785) 463-5463					
TREASURER		, 			
Name S+	eve Wohler			ome Telephone 785) 632 -	5185
Mailing Address (Street, City, State, Zip Code) 738 Crawford Clay Center KS. 67432 (785) 632-5275					
AFFILIATED OR CONNECTED ORGANIZATIONS					
Name Kansas Republican Party					
Mailing Address (Street, City, State, Zip Code) 2405 SW 21st. St. 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.					
belief is true, co	this statement has been orrect and complete. I filing a false documer	understand that the in	tentional fai	•	
$\frac{10-8-1}{\text{(Date)}}$	2	(Signa	ture of Chair	nperson)	_
Governmental H	Ethics Commission				Rev.2000

STATEMENT OF ORGANIZATION

RECEIVED

Rev.2000

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

KS Governmental Etimo Commissi ya (See Reverse Side For Instructions) Party Committee Political Action Committee This is a (check one) Initial Statement Amended Statement This is an (check one) COMMITTEE (PLEASE TYPE OR PRINT) Name Mailing Address (Street, City, State, Zip Code)) 632-3431 **CHAIRPERSON** Home Telephone (785) 632-3431 Name Mailing Address (Street, City, State, Zip Code) Business Telephone Street Clay Center, KS 67432 TREASURER Home Telephone Name (785) 632-5185 Mailing Address (Street, City, State, Zip Code) Business Telephone Strept Clay Center, KS 67432 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 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." Past Chairman

Governmental Ethics Commission