STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

	(See Reverse Side For Instructions)			FILED
	This is a (check one) This is an (check one)	Party Committee Initial Statement	Political Action Committee Amended Statement	DEC 3 1 2 0
COMMITTE		(PLEASE TYPE OR	DD INIT)	KRIIS W. KOBAG SECRETARY OF S
Name	ounty Republican Co		FRIIVI)	
Mailing Address (Street, City, State, Zip Code) 914 Harvest, Howard, KS 67349			Business Telephone (620) 5501437	
CHAIRPERS	ON _			
Name David Evans			Home Telephone (620) 5501437	
Mailing Address (Street, City, State, Zip Code) 914 Harvest, Howard, KS 67349			Business Telephone	
TREASURE	R			
Name Aimee	e Cook		Home Telephone (620) 3294340	
Mailing Addro	ess (Street, City, State Highway 160, Elk Fa	, Zip Code) lls, KS 67345	Business Telephone	
AFFILIATED	OR CONNECTED C	RGANIZATIONS		
Name				
Mailing Addre	ess (Street, City, State	, Zip Code)		
If not connected	or affiliated with an org	ganization, identify the tra	de, profession, or primary interest	of the contributors.
belief is true, cor intentionally	this statement has bee correct and complete. y filing a false docume	•	o the best of my knowledge and entional failure to file this docur	
$\frac{12-12}{\text{(Date)}}$	-2012	(Signati	ure of Chairperson)	_
Governmental	Ethice Commission			Rev 2000