

FILED

SEP 13 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 type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name  
*KINGMAN COUNTY REPUBLICAN CENTRAL COMMITTEE*

Mailing Address (Street, City, State, Zip Code)      Business Telephone  
*6290 SE 4041 ST, MURDOCK, KS 67111      (620) 297-3468*

CHAIRPERSON

Name      Home Telephone  
*JOHN KUSZMAUL      (620) 297-3468*

Mailing Address (Street, City, State, Zip Code)      Business Telephone  
*6290 SE 4041 ST, MURDOCK, KS 67111      ( ) SAME*

TREASURER

Name      Home Telephone  
*JOHN BOYER IV      (620) 532-2853*

Mailing Address (Street, City, State, Zip Code)      Business Telephone  
*444 AVE. B WEST, KINGMAN, KS 67068      (620) 532-5821*

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."

9/10/10  
(Date)

*Sharon Kastner*  
(Signature of Chairperson)  
*outgoing Chair*