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**Campaign Finance
Statement of Organization
For Political Action Committees
And Party Committees**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is a (Check one) **Party Committee** **PAC**

This is an (Check one) **Initial Appointment** **Amended Statement**

Committee

Name: **Leavenworth County Republican Central Committee**

Address: **13921 - 166th St.**

Address2:

City: **Bonner Springs** State: **KS** Zip: **66012**

Business Phone: **(913) 526-0896**

Email Address: **barbpaulus1@gmail.com**

Chairperson

Name: **Barbara Paulus**

Address: **13921 - 166th St.**

Address2:

City: **Bonner Springs** State: **KS** Zip: **66012**

Home Telephone: **(913) 422-7702** Business Phone: **(913) 526-0896**

Email Address: **barbpaulus1@gmail.com**

Treasurer

Name: **Linda Flanagan**

Address: **405 N. Broadway**

Address2:

City: **Leavenworth** State: **KS** Zip: **66048-0851**

Home Telephone: **(913) 651-3176** Business Phone: **(913) 240-4142**

Email Address: **lflanagan@lvnworth.com**

**Affiliated or Connected
Organizations**

Name: **Kansas GOP**

Address: **P.O. Box 4157**

Address2:

City: **Topeka** State: **KS** Zip: **66604**

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

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.

Executed on:

Date: **10/29/2012 12:19:32 AM** Signature of Chairperson: **Barbara Paulus**

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This is a (Check one) Party Committee PAC

This is an (Check one) Initial Appointment Amended Statement

CommitteeName: **Leavenworth County Republican Central Committee**Address: **125 Rock Creek Loop**

Address2:

City: **Lansing** State: **KS** Zip: **66043**Business Phone: **(913) 683-0871**Email Address: **JBradford@kc.rr.com****Chairperson**Name: **John Bradford**Address: **125 Rock Creek Loop**

Address2:

City: **Lansing** State: **KS** Zip: **66043**Home Telephone: **(913) 351-3688** Business Phone: **(913) 683-0871**Email Address: **JBradford@kc.rr.com****Treasurer**Name: **Linda Flanagan**Address: **405 N. Broadway**

Address2:

City: **Leavenworth** State: **KS** Zip: **66048-0851**Home Telephone: **(913) 651-3176** Business Phone: **(913) 240-4142**Email Address: **lflanagan@lvnworth.com****Affiliated or Connected
Organizations**Name: **Kansas GOP**Address: **P.O. Box 4157**

Address2:

City: **Topeka** State: **KS** Zip: **66604**

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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.

Executed on:

Date: **10/25/2010 10:07:58 AM** Signature of Chairperson: **John Bradford**[Print this form](#) or [Go Back](#)