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	OCT 2 2 20
	This is an (check one)	Initial Statement	Amended Statement	
i	<u> </u>			KRIS W. KOBAC SECRETARY OF S
COMMITTEE		(PLEASE TYPE O	R PRINT)	
Name Repu	blic County	Republican (Central Committee	e
Mailing Address	ss (Street, City, State <u>n Rd., Rope</u>	, Zip Code) (4.61, 'C., 14.5.669)	Central Committee Business Telephone (785) 361-2	472
CHAIRPERSC	·			
Name Caro	olyn Simm:	5	Home Telephone (785) 361-24	172
			Business Telephone (Sance)	
TREASURER	, 	,		_
Name Kar	en Dropse	Λ <u> </u>	Home Telephone (985) 517-2	750
Mailing Addres	ss (Street, City, State Country Club	Zip Code) Dr. Belleville t	Business Telephone (Salle)	
	OR CONNECTED C			
Name				
Mailing Address	ss (Street, City, State	, Zip Code)		
f not connected of	or affiliated with an org	ganization, identify the tr	ade, profession, or primary interes	t of the contributors.
SIGNATURE: "I declare that the	nis statement has bee	n examined by me and	to the best of my knowledge and	1
		•	tentional failure to file this docu	
or intentionally	filing a false docume	ent is a class A misdem	eanor."	
/0-10-12 (Date)	2	Lake (Signat	Lyn Senence Ture of Chairperson)	
(Bute)	thics Commission	(o.Sim		Rev.2000

Reorganization was held on Oct 4th

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

FILED (See Reverse Side For Instructions)					
This is a (check one) Party Committee Political Action Committee					
This is an (check one) Initial Statement Amended Statement					
OF TARY OF STARY					
SECOMMITTEE (PLEASE TYPE OR PRINT)					
This is a (check one) Party Committee Political Action Committee This is an (check one) Initial Statement Amended Statement SECOMMITTEE (PLEASE TYPE OR PRINT) Name Republic County Republican Central Committee					
Mailing Address (Street, City, State, Zip Code) Mailing Address (Street, City, State, Zip Code)					
KS 66935					
CHAIRPERSON					
Name Home Telephone					
Lynda Carolyn Simms (785) 361-2472 Mailing Address (Street, City, State, Zip Code) Ceil Business Telephone					
Mailing Address (Street, City, State, Zip Code) 549 Elm Rd. Republic KS (66964 (785) 527-0292					
191 Elm Ra REPUBLIC NO 66967 (183) 001 02/2					
TREASURER					
Name Home Telephone					
Karen M. Dreesen (285) 527-2750					
Mailing Address (Street, City, State, Zip Code) Ceil Business Telephone					
Mailing Address (Street, City, State, Zip Code) 2013 Country Club Dr.; Belleville KS. (785) 527-3561					
AFFILIATED OR CONNECTED ORGANIZATIONS					
Name Kansas Republican Party					
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."					
of intentionally filling a false document is a class A fills deflication.					
8-24-10 Tyxda aralyn Ximms					
(Date) (Signature of Chairperson)					

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Governmental Ethics Commission