STATEMENT OF ORGANIZATION	
FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES	
(See Reverse Side For Instructions)	
This is a (check one)Image: Party CommitteeThis is an (check one)Initial Statement	Political Action Committee Amended Statement
COMMITTEE (PLEASE TYPE OR PRINT)	
Name Shawnee County Republican Central Committee	
Mailing Address (Street, City, State, Zip Code) P.O. Box 4433, Topeka, Ks 66604	Business Telephone
CHAIRPERSON	
Name Robert Eckhardt	Home Telephone (785) 478-0715
Mailing Address (Street, City, State, Zip Code) 2948 SW Staffordshire Rd, Topeka, Ks 66614	Business Telephone
TREASURER	
Name John Martin	Home Telephone (_785) 633-0243
Mailing Address (Street, City, State, Zip Code) 2030 SW Sims Ave, Topeka, Ks 66604	Business Telephone (-)
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name Kansas Republican Party	
Mailing Address (Street, City, State, Zip Code) 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.	
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." $\frac{1/15/2010}{(Date)}$ Refut Manual Complete. Signature of Chairperson	

Governmental Ethics Commission

Rev.2000

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