AFFIDAVIT OF EXEMPTION BY A PARTY COMMITTEE RECEIVES AND EXPENDITURES REPORTS BY A PARTY COMMITTEE OR POLIFICAL ACTION CONTINUES, REPORTS BY OUR COMMITTEE RECEIVED OR EXPENDED OR CONTRACTED TO EXPEND 500 OR MORE IN CALENDAR YEAR 2013 OR FYOUR COMMITTEE RECEIVED A CONTRUCTION IN EXCESS OF 550 FROM ANY ONE CONTRIBUTOR, THIS FORM MAY NOT BE USED. Instructions: This form may be used by the treasurer of any party committee or political action committee which qualifies for the exemption. THIS AFFIDAVIT MUST BE FILED WITH THE SECRETARY OF STATE (120 SW 10 ⁹ , 1 ^{ef} Hoor Memorial Hall, TOPEKA, KANSAS 66612) PRIOR TO JANUARY 10, 2014. If a party or political action committee which qualifies for the exemption, a Statement of Organization still must be filed and the treasurer must maintain the required records. (S. S. A. 25-4145) PLEASE PRINT OR TYPE A. Name of Committee <u>Saline County Republican Central Committee</u> Address <u>PO Box 2513</u>		<u>FILED</u>	
F FOUR COMMITTEE RECEIVED OR EXPENDED OR CONTRACTED TO EXPEND \$500 OR MORE IN CALENDAR YEAR 2013 OR IF YOUR COMMITTEE RECEIVED A CONTRUCTION IN EXCESS OF \$50 FROM ANY ONE CONTRIBUTOR, THIS FORM MAY NOT BE USED. Instructions: This form may be used by the treasurer of any party committee or political action committee which qualifies for the exemption. THIS AFTDAVIT MUST BE FILED WITH THE SECRETARY OF STATE (120 SW 10°, 1°Floor Memorial HallTOPEKA, KANSAS 66(2) PRIOR TO JANUARY 10, 2014. If a party or political action committee qualifies for this exemption, a Statement of Organization still must be filed and the treasurer must maintain the required records. (K.S.A. 25-4145) PLEASE PRINT OR TYPE A. Name of Committee Saline County Republican Central Committee Address 67402-2513 Telephone 785-823-1333 B. Name of Treasurer Linda A. Reynolds Address Address 625 S Santa Fe (t) Saline (t) Linda A. Reynolds (t) Use of Party or Political Action Committee do swear (or affirm) that: (Name of Party or Political Action Committee) 1. The information in items A and B above is true and correct; (t) the non-election year to which this affidavit applies, the above party or political action committee received contracted to expende and swont to value of est than the hundred dolars (5500); 3. In the non-election year to whi	FROM FILING RECEIPTS AND EXPENDITURES REP	IMITITEEW KOBACH	
THIS AFFIDAVIT MUST BE FILED WITH THE SECRETARY OF STATE (120 SW 10°, 1° Floor Memorial Hall, TOPEKA, KANSAS 66(2) PRIOR TO JANUARY 10, 2014. If a party or political action committee qualifies for this exemption, a Statement of Organization still must be filed and the treasurer must maintain the required records. (K.S.A. 25-4145) PLEASE PRINT OR TYPE A. Name of Committee Saline Address PO Box 2513 City Salina Telephone 785-823-1333 B. Name of Treasurer Linda A. Reynolds Address 825 S Santa Fe City Salina Zip Code 67401 Home Telephone 785-823-1333 C. Affidavit: State of Kansas State of Kansas) County of Saline	IF YOUR COMMITTEE RECEIVED OR EXPENDED OR CONTRACTED TO EXPEND \$500 OR MORE IN CALENDAR YEAR 2013 OR IF YOUR COMMITTEE RECEIVED A CONTRIBUTION IN EXCESS OF \$50 FROM ANY ONE		
66612) PRIOR TO JANUARY 10, 2014. If a party or political action committee qualifies for this exemption, a Statement of Organization still must be filed and the treasurer must maintain the required records. (K.S.A. 25-4145) PLEASE PRINT OR TYPE A. Name of Committee Saline County Republican Central Committee Address PO Box 2513 City Salina Zip Code 67402-2513 Telephone 785-823-1333 B. Name of Treasurer Linda A. Reynolds Address 825 S Santa Fe City Salina Zip Code 67401 Home Telephone 785-825-8779 Business Telephone 785-823-1333 C. Afidavit: State of Kanass) County of Saline J. Linda A. Reynolds treasurer of the do swear (or affirm) that: (Name of Party or Political Action Committee) do swear (or affirm) that: I. The information in Items A and B above is true and correct; to the non-election year to which this affidavit applies, the above party or political action committee expended or contracted to expend, an aggregate amount or value of less than five hundred dollars (5500); 3. In the non-election year to which this affidavit applies, the above party or political action committee exceived contributions in an aggregate amount or value of less than five hundred dollars (5500); 4. In the non-election year to which this affidavit applies, the above party or polit	Instructions: This form may be used by the treasurer of any party committee or political action committee which qualifies for the exemption.		
A. Name of Committee Saline County Republican Central Committee Address PO Box 2513 City Salina Zip Code 67402-2513 Telephone 785-823-1333 Telephone 785-823-1333 B. Name of Treasurer Linda A. Reynolds Zip Code 67401 Address 825 S Santa Fe City Salina Zip Code 67401 Home of Treasurer Linda A. Reynolds Zip Code 67401 Home Telephone 785-825-8779 Business Telephone 785-823-1333 C. Affidavit: State of Kanesa County of Saline	66612) PRIOR TO JANUARY 10, 2014. If a party or political action committee qualifies for this exemption, a Statement of Organization		
Address PO Box 2513 City Salina Zip Code 67402-2513 Telephone 785-823-1333	PLEASE PRINT OR TYPE		
Telephone 785-823-1333 B. Name of Treasurer Linda A. Reynolds Address 825 S Santa Fe City Salina Zip Code 67401 Home Telephone 785-825-8779 Business Telephone 785-823-1333 C. Affidavit: State of Kansas) County of Saline) . I, Linda A. Reynolds , treasurer of the Saline County Republican Central Committee do swear (or affirm) that: (Name of Party or Political Action Committee) do swear (or affirm) that: I. The information in Items A and B above is true and correct; . In the non-election year to which this affidavit applies, the above party or political action committee expended or contracted to expend, an aggregate amount or value of less than five hundred dollars (\$500); 3. In the non-election year to which this affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received no contributions in an aggregate amount or value of less than five hundred dollars (\$500); 3. In the non-election year to which this affidavit applies, the above party or political action committee received no contributions in an aggregate amount or value of less than five hundred dollars (\$500); <td< td=""><td>A. Name of Committee Saline County Republican Central Committee</td><td></td></td<>	A. Name of Committee Saline County Republican Central Committee		
B. Name of Treasurer Linda A. Reynolds Address <u>825 S Santa Fe</u> City <u>Salina</u> Tip Code <u>67401</u> Home Telephone <u>785-825-8779</u> Business Telephone <u>785-823-1333</u> C. Affidavit: State of Kansas County of <u>Saline</u> I, <u>Linda A. Reynolds</u> , treasurer of the <u>Saline County Republican Central Committee</u> Saline County Republican Central Committee (Name of Party or Political Action Committee) 1. The information in Items A and B above is true and correct; 2. In the non-election year to which this affidavit applies, the above party or political action committee expended or contracted to expend, an aggregate amount or value of less than five hundred dollars (S500); 3. In the non-election year to which this affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (S500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (S500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (S500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received contributions in an aggregate amount or value in excess of fifty dollars (S50) from any one contributor. $\frac{I-3-I/4}{(Date)}$ Subscribed and swom to (affirmed) before me this <u>378</u> day of <u>Muture</u> , <u>20 IV</u> (Notary Public) (Seal) My Appointment Expires <u>My (S - , 20 IV</u>	Address PO Box 2513 City Salina	Zip Code <u>67402-2513</u>	
Address 825 S Santa Fe City Salina Zip Code 67401 Home Telephone 785-825-8779 Business Telephone 785-823-1333 C. Affidavit: State of Kansas) County of Saline) I, Linda A. Reynolds , treasurer of the	Telephone 785-823-1333		
Home Telephone 785-825-8779 Business Telephone 785-823-1333 C. Affidavit: State of Kansas State of Kansas) County of Saline	B. Name of Treasurer Linda A. Reynolds		
C. Affidavit: State of Kansas County of <u>Saline</u> I, <u>Linda A. Reynolds</u> , treasurer of the <u></u> <u>Saline County Republican Central Committee</u> (Name of Party or Political Action Committee) 1. The information in Items A and B above is true and correct; 2. In the non-election year to which this affidavit applies, the above party or political action committee expended or contracted to expend, an aggregate amount or value of less than five hundred dollars (\$500); 3. In the non-election year to which the affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received no contributions in an aggregate amount or value in excess of fifty dollars (\$50) from any one contributor. <u>I-3-I4</u> (Bate) Subscribed and sworn to (affirmed) before me this <u>JOHNA. REYNOLDS</u> (Seal <u>NUTARY PUBLIC-State of Kansas</u> JOHNA. REYNOLDS (Notary Publik) (Seal <u>My Appointment Expires <u>My. (5</u>, 20 <u>14</u>)</u>	Address 825 S Santa Fe City Salina	Zip Code <u>67401</u>	
C. Affidavit: State of Kansas County of <u>Saline</u> I, <u>Linda A. Reynolds</u> , treasurer of the <u></u> <u>Saline County Republican Central Committee</u> (Name of Party or Political Action Committee) 1. The information in Items A and B above is true and correct; 2. In the non-election year to which this affidavit applies, the above party or political action committee expended or contracted to expend, an aggregate amount or value of less than five hundred dollars (\$500); 3. In the non-election year to which the affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received no contributions in an aggregate amount or value in excess of fifty dollars (\$50) from any one contributor. <u>I-3-I4</u> (Bate) Subscribed and sworn to (affirmed) before me this <u>JOHNA. REYNOLDS</u> (Seal <u>NUTARY PUBLIC-State of Kansas</u> JOHNA. REYNOLDS (Notary Publik) (Seal <u>My Appointment Expires <u>My. (5</u>, 20 <u>14</u>)</u>	Home Telephone	333	
Saline County Republican Central Committee do swear (or affirm) that: (Name of Party or Political Action Committee) do swear (or affirm) that: 1. The information in Items A and B above is true and correct; In the non-election year to which this affidavit applies, the above party or political action committee expended or contracted to expend, an aggregate amount or value of less than five hundred dollars (\$500); 3. In the non-election year to which the affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received no contributions in an aggregate amount or value in excess of fifty dollars (\$500) from any one contributor. Image: Imag	C. Affidavit: State of Kansas)		
(Name of Party or Political Action Committee) 1. The information in Items A and B above is true and correct; 2. In the non-election year to which this affidavit applies, the above party or political action committee expended or contracted to expend, an aggregate amount or value of less than five hundred dollars (\$500); 3. In the non-election year to which the affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); 4. In the non-election year to which this affidavit applies, the above party or political action committee received no contributions in an aggregate amount or value in excess of fifty dollars (\$50) from any one contributor. Image: Image	I, Linda A. Reynolds, treasurer of the		
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 In the non-election year to which this affidavit applies, the above party or political action committee expended or contracted to expend, an aggregate amount or value of less than five hundred dollars (\$500); In the non-election year to which the affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); In the non-election year to which this affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); In the non-election year to which this affidavit applies, the above party or political action committee received no contributions in an aggregate amount or value in excess of fifty dollars (\$50) from any one contributor. <u>1-3-/4</u> (Date) (Signature of Treasurer) Subscribed and sworn to (affirmed) before me this <u>3</u> day of <u>Anut Apry</u>, <u>20,14</u> (Seal) My Appointment Expires <u>MOV. (5, 20, 14</u>) 	(Name of Party or Political Action Committee)		
(Date) (Date) Subscribed and sworn to (affirmed) before me this <u>3</u> day of <u>AwJu Awy</u> , 20, 14 NOTARY PUBLIC - State of Kansas JOHN A. REYNOLDS (Seal) My Appt. Exp. <u>14574</u> My Appointment Expires <u>NOV. (5</u> , 20, 14)	 In the non-election year to which this affidavit applies, the above party or political action committee expended or contracted to expend, an aggregate amount or value of less than five hundred dollars (\$500); In the non-election year to which the affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); In the non-election year to which the affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500); In the non-election year to which this affidavit applies, the above party or political action committee received no contributions 		
Subscribed and sworn to (affirmed) before me this 3 day of AnJu Any , 20 14 NOTARY PUBLIC - State of Kansas J JOHN A. REYNOLDS (Seal) My Appt. Exp. <u>16574</u> My Appointment Expires <u>Nov. 15</u> , 20 14		Kynols	
(Seal) NOTARY PUBLIC - State of Kansas JOHN A. REYNOLDS My Appt. Exp. <u>14:5-74</u> (Notary Public) My Appointment Expires <u>Nov. (5</u> , 20, 14)	20 1		
My Appointment Expires $NoY \cdot 15$, 20 14	NOTARY PUBLIC - State of Kansas J JOHN A. REYNOLDS My Appt. Exp. JL:5-14 (Notary	Public)	
	My Appointment Expires Nov. 15	, 20 <u>14</u> Rev. 2000	