	FILED
	JUN 1 9 2014
STATEMENT OF ORGANIZATION	KRIS W. KÖBACH SECRETARY OF STATE
FOR POLITICAL ACTION COMMITTEES AND PARTY CO	OMMITTEES
(See Reverse Side For Instructions)	
This is a (check one) X Party Committee Political Action Committee	ee
This is an (check one) Initial Statement Amended Statement	
COMMITTEE (PLEASE TYPE OR PRINT)	
Name Gove County Republican CC	
Mailing Address (Street, City, State, Zip Code) Business Telepho	one
5025 County Read H Com Ks 6736 (620)397.	
CHAIRPERSON	
Name Home Telephone	
William E. Prather (620)387-	
Mailing Address (Street, City, State, Zip Code) 5025 County Rd. H Gove. 55, 67136 (625) 397-	
TREASURER	
Name Home Telephone	
Jeff Prather (,620)397-	
Mailing Address (Street, City, State, Zip Code) 698 ( D. Rd 44 Gove, K5 47736 (620) 397	
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AFFILIATED OR CONNECTED ORGANIZATIONS	· · · · · · · · · · · · · · · · · · ·
Mailing Address (Street, City, State, Zip Code)	
	· · · · ·
f not connected or affiliated with an organization, identify the trade, profession, or primary int	erest of the contributors.
SIGNATURE:	
'I declare that this statement has been examined by me and to the best of my knowledge	
belief is true, correct and complete. I understand that the intentional failure to file this c or intentionally filing a false document is a class A misdemeanor."	locument
(Date) (Signature of Chairperson)	

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OCT FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTE SECRET (See Reverse Side For Instructions)	ES
(See Reverse Side For Instructions)	
This is a (check one) X Party Committee Political Action Committee	
This is an (check one) Initial Statement Amended Statement	
COMMITTEE (PLEASE TYPE OR PRINT)	
Name Gove Connty Republican Party Central Constitue	
Name Gove Connity Republican Farty CENTral Constitue Mailing Address (Street, City, State, Zip Code) Business Telephone SD23 Connity Road H Gove, Kis (17736 (220) 397-5590	
CHAIRPERSON	
Name Home Telephone Arnold W Prather (620) 397-5590	2
Mailing Address (Street, City, State, Zip Code) 67736 Business Telephone 5023 (0. Rd H Gove Ks ())	
TREASURER	
Name Home Telephone (785)824-3357	7
Mailing Address (Street, City, State, Zip Code) 67738 Business Telephone 2320 (0-Rd. 32 Grinnell Ks ())	
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name Kausa R II OT	
Mailing Address (Street, City, State, Zip Code)	
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the cont Kansas Republican Party	tributors.
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."	
(Date) (Signature of Chairperson)	
Governmental Ethics Commission R	ev.2000