## STATEMENT OF ORGANIZATION

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| FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEE  |
| (See Reverse Side For Instructions)  |
| (See Reverse Side For Instructions)  This is a (check one) Party Committee Political Action Committee  This is an (check one) Initial Statement Amended Statement  SECRETARY OF STATE  |
| COMMITTEE (PLEASE TYPE OR PRINT)   |
| Name Sherman County Republican Committee  Mailing Address (Street, City, State, Zip Code)  1455 Hwy 27 Good land KS 67735 ()   |
| CHAIRPERSON  |
| Name  Botty Jean Schields  Mailing Address (Street, City, State, Zip Code)  Home Telephone  (785) 899-5851  Business Telephone   |
| Mailing Address (Street, City, State, Zip Code)  Business Telephone  7455 Hwy 27 Goodland K 5 67735 ()   |
| TREASURER  |
| Name Home Telephone (785) 399-2313   |
| Mailing Address (Street, City, State, Zip Code)  Business Telephone  3 2-0 Rd 64 Kanoralo Ks 67) 41  |
| AFFILIATED OR CONNECTED ORGANIZATIONS  |
| Name The Kansas Republican Party   |
| Mailing Address (Street, City, State, Zip Code)  Topeka, KS  |
| If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.  |
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| 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)  Setty Jean Schields (Signature of Chairperson)   |
| Governmental Ethics Commission Rev.2000  |