PECEIVED AFFIDAVIT OF EXEMPTION FROM FILING RECEIPTS AND EXPENDITURES REPORTS

BY A PARTY COMMITTEE OR POLITICAL ACTION COMMITTEE

IF YOU ANTICIPATE RECEIVING OR EXPENDING OR CONTRACTING TO EXPEND \$500 OR MORE IN CALENDER MINISTER FOR POLITICAL ACTION CONTRIBUTION, THIS FIGURE A CONTRIBUTION IN FXCESS 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 AFFIDAVIT MUST BE FILED WITH THE SECRETARY OF STATE (120 SW 10th, 1th Floor Memorial Hall, TOPEKA, KANSAS 66612) PRIOR TO January 10, 2016. 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_67402	Zip Code 67402
Telephone 785-823-1333		
B. Name of Treasurer LINDA A. REYNOLDS		
Address 825 S SANTA FE	City_SALINA	Zip Code 67401
Home Telephone <u>785-712-7278</u> Business Telephone <u>785-823-1333</u>		
C. Affidavit; State of Kansas County of SALINE		
I, LINDA A. REYNOLDS	, treasurer	of the
SALINE COUNTY REPUBLICAN CENTRAL COMMITTEE		
Governmental Ethics Commission	My Appointment Expires	, 20