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	and the second	(See Reverse Side Fo		NOV 21 2016
1	This is a (check one)	Party Committee	Political Action Committee	
	This is an (check one)	Initial Statement	Amended Statement	KRIS W. KOBACH SECRETARY OF STAT
COMMITTEE		(PLEASE TYPE O	OR PRINT)	
Name FRANK	LIN COUNTU	1 Republican	SCentral Comm	Hee
Mailing Addres	s (Street, City, State ) Ottawa, K	e, Zip Code) 55 66067	Business Telephone	) 
CHAIRPERSO	N			
Name Row	KIMES		Home Telephone $(785) 242$	
Mailing Addres //// E.O.	s (Street, City, State	e, Zip Code) a. KS 66067	Cell Business Telephone (185) 229-	2426
TREASURER		·		
Name Julie	WARREN		Home Telephone	-4283
Mailing Addres	ss (Street, City, State	te, Zip Code) DHawar KS	Business Telephone	>
AFFILIATED	OR CONNECTED	ORGANIZATIONS	<b>,</b>	
Name	SICCOLLECTED		<u> </u>	
Mailing Addres	ss (Street, City, State	te Zin Code)	•	
If not connected $c$	or affiliated with an or	organization, identify the	trade, profession, or primary intere	est of the contributor
	±			
SIGNATURE:				
"I declare that th		•	d to the best of my knowledge a	
	-	. I understand that the innert is a class A misden	ntentional failure to file this doo	cument

STATEMENT OF ORGANIZATION	
FOR POLITICAL ACTION COMMITTEES AND PARTY COMMIT $_{\mathcal{R}}$	TEES Eceived
(Con Devenue Cide Four Instructions)	
This is a (check one) Party Committee Political Action Committee	<b>16</b> 2015
This is an (check one) Initial Statement Amended Statement	el Ethics Commission
COMMITTEE (PLEASE TYPE OR PRINT)	
Name Franklin Country REDUBLICAN CENTRA	1 Committe
Mailing Address (Street, City, State, Zip Code) 540 W, 54 G, 64 G, 75 Business Telephone	
66067	
CHAIRPERSON	
Name BOBFLUTTE Home Telephone (155) 242-74	+67
Mailing Address (Street, City, State, Zip Code) 540 IN. 13#9. CTAWA, KS (755) X14 - 72	413
66067	
TREASURER	
Name Home Telephone (785) 873-4561	
Mailing Address (Street, City, State, Zip Code) 1439 Ohio Kal, Princeton, KS 66078()	
AFFILIATED OR CONNECTED ORGANIZATIONS	———————————————————————————————————————
Mailing Address (Street, City, State, Zip Code)	
	J
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the $foll ffc dfl$	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 misdemean $A^{m}$	
1/14/15 200 - 1/100-	
(Date) (Signature of Chairperson)	
Governmental Ethics Commission	Rev.2000