STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

		FILED						
	This is a (check one)	Party Co	mmittee		Political Action Comr			
	This is an (check one)	Initial S	tatement	Ø	Amended Statement	10V 1 6 2016		
COMMITTEE		(DI EASE '	TVDE OD	חמם.	īŢ,	KRIS W. KOBACH		
COMMITTEE (PLEASE TYPE OR PRINT) SECRETARY OF STATE								
Name Linn County Republican Central Committee								
Mailing Address (Street, City, State, Zip Code) Business Telephone								
CHAIRPERSO	ON							
Name Home Telephone						e		
						4-6487		
Mailing Address (Street, City, State, Zip Code) 18426 E. 1200 Rd., Pleasanton, Ks. () Business Telephone								
TREASURER								
Name Ky,	sty Sch	m'fz			Home Telephone (9/3)89			
Mailing Address (Street, City, State, Zip Code) 1924/ Farlin Rd., Parker, Ks. (913) 195-2226								
AFFILIATED OR CONNECTED ORGANIZATIONS								
Name Lansas Republican Party								
Mailing Address (Street, City, State, Zip Code)								
2605 510 21st St., Topela, Xa. 66604								
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the 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 misdemeanor."								
(Date) (Signature of Chairperson)								
(Date) (Signature of Champerson):								

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Governmental Ethics Commission

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STATEMENT OF ORGANIZATION

KS Governmental Ethics Commission

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

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	(See Reverse	Side For Instruc	tions)	_			
This	s is a (check one) Party Co	ommittee	Political Action Committee]			
This	s is an (check one) Initial S	Statement	Amended Statement				
COMMITTEE	(PLEASE 7	TYPE OR PRIN	T)				
Name LUD	Cousty Repair	olican (Pentra) Co	mmittee			
Mailing Address (St	treet, City, State, Zip Code)	d Doers	Business Telephone	056			
CHAIRPERSON			9137314	1769			
Name Leslie	Dichardson		Home Telephone (4/3795 - 92	001			
Mailing Address (St	reet, City, State, Zip Code) 1 L		Business Telephone				
TREASURER							
Name Take	16de		Home Telephone (913)757	7475			
Mailing Address (St. 234971/)	reet, City, State, Zip Code)	ana Ks	Business Telephone	2375			
AFFILIATED OR C	CONNECTED ORGANIZATION	ONS					
Name	Respertien	w) Pas	b,				
Mailing Address (Street, City, State, Zip Code)							
If not connected or affil	liated with an organization, ident	ify the trade, profe	ession, or primary interes	t of the contributors.			
SIGNATURE:	stament has been everyingd by	and to the he	or of my lenovyladga and	1			
"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."							
8-27-19		, ,	Muhardson hairperson)	\sim			
(Date)		(Signature of Cl	nairperson)				

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