| | FILED |
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| STATEMENT OF ORGANIZATION | DEC 1 4 2018 Kris w. kobach Secretary of state |
| FOR POLITICAL ACTION COMMITTEES AND PARTY CO | |
| (See Reverse Side For Instructions) This is a (check one) This is an | e |
| COMMITTEE (PLEASE TYPE OR PRINT) | |
| Name (ond (onthe Republican Central Mailing Address (Street, City, State, Zip Code) 716 W 8the Convolia (785) 614 KS 66901 CHAIRPERSON | Commi Hel |
| Manning Address (Street, City, State, Zip Code) Business Telepho 716 W 8+4 (awdia (785) 614 | - 2590 |
| CHAIRPERSON | |
| Name Home Telephone (785) 614 | |
| Mailing Address (Street, City, State, Zip Code)Business Telephon716St.Cocord.m, KS (CGO)St.716St.Cocord.m, KS (CGO)St. | inne |
| TREASURER | |
| Name Home Telephone Aoney Artch? son (785) 243 | - 8710 |
| Mailing Address (Street, City, State, Zip Code)Business Telephon716W 8th 5thConcordia, KS(785)243 | ne 5 - 8710 |
| AFFILIATED OR CONNECTED ORGANIZATIONS | |
| Name N/A | |
| Mailing Address (Street, City, State, Zip Code) | |
| If not connected or affiliated with an organization, identify the trade, profession, or primary inter- | 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 do or intentionally filing a false document is a class A misdemeanor." | |
| 12/10/18 Ford | |
| (Date) (Signature of Chairperson) | |
| Governmental Ethics Commission | Rev.2000 |

| STATEMENT OF ORGANIZATION | | |
|---|--------------------------------------|--|
| FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES | | |
| $(\mathbf{G}_{1}, \mathbf{P}_{2}, \dots, \mathbf{G}_{n}^{T})$ | RECEIVED | |
| (See Reverse Side For Instructions) This is a (check one) | JAN 1 1 2016 | |
| This is an (check one) Initial Statement Amended Stateme | | |
| COMMITTEE (PLEASE TYPE OR PRINT) | | |
| Name Cloud County Republican Party | | |
| Mailing Address (Street, City, State, Zip Code)Business Te716 W. 8th St., Concordia, KS 66901(785) 6 | lephone 14-2590 | |
| CHAIRPERSON | | |
| | Home Telephone (785) 614-2590 | |
| Mailing Address (Street, City, State, Zip Code)Business Te716 W. 8th St., Concordia, KS 66901(785) 6 | lephone 14-2590 | |
| TREASURER | | |
| | Home Telephone (785) 243-8710 | |
| | Business Telephone (785) 243-8710 | |
| AFFILIATED OR CONNECTED ORGANIZATIONS | | |
| Name Kansos Republican Party | | |
| Mailing Address (Street, City, State, Zip Code) 20 Box 4157 Toplka KS 6660 | -1 | |
| 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 know belief is true, correct and complete. I understand that the intentional failure to file or intentionally filing a false document is a class A misdemeanor." | | |
| 1-8-16 Ba Mitter | | |
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| Governmental Ethics Commission | Rev.2000 | |