

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input checked="" type="checkbox"/> Party Committee	<input type="checkbox"/> Political Action Committee
This is an (check one)	<input type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Harvey County Republican Central Committee	
Mailing Address (Street, City, State, Zip Code)	1609 E 9th Newton, KS 67114	Business Telephone () 316 283-0016

CHAIRPERSON

Name	Jason Mitchell (President)	Home Telephone (316) 680-6456
Mailing Address (Street, City, State, Zip Code)	P.O. Box 523 Newton, KS 67114	Business Telephone (316) 680-6456

TREASURER

Name	Edward A. Myers	Home Telephone (316) 283-0016
Mailing Address (Street, City, State, Zip Code)	1609 E. 9th Newton, KS 67114	Business Telephone ()

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	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.

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."

7-31-15 (Date)

Handwritten signature of Jason Mitchell

X _____ (Signature of Chairperson)

Jason Mitchell (President)