

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED

OCT 15 2018

KRIS W. KOBACH
SECRETARY OF STATE

(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 checked="" type="checkbox"/> Initial Statement | <input type="checkbox"/> Amended Statement |

COMMITTEE (PLEASE TYPE OR PRINT)

| | | |
|---|-----------------------------------|---------|
| Name | MCPHERSON COUNTY REPUBLICAN PARTY | |
| Mailing Address (Street, City, State, Zip Code) | Business Telephone | |
| BOX 984 | (620) | 2415635 |

CHAIRPERSON

| | |
|---|--------------------|
| Name | Home Telephone |
| CHERYL STIEBEN | (620) 242-6445 |
| Mailing Address (Street, City, State, Zip Code) | Business Telephone |
| 540 S. PARK, MCPHERSON, KANSAS 67460 | () |

TREASURER

| | |
|---|--------------------|
| Name | Home Telephone |
| ROYCE C. JANSSEN | (620) 585-2323 |
| Mailing Address (Street, City, State, Zip Code) | Business Telephone |
| 845 CHISHOLM, INMAN, KANSAS 67546 | () |

AFFILIATED OR CONNECTED ORGANIZATIONS

| |
|---|
| Name |
| KANSAS REPUBLICAN PARTY |
| Mailing Address (Street, City, State, Zip Code) |
| BOX 4157, TOPEKA, KANSAS 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."

10-10-18
(Date)

Cheryl Stieben
(Signature of Chairperson)