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**Campaign Finance  
Statement of Organization  
For Political Action Committees  
And Party Committees**

Governmental Ethics Commission  
901 S. Kansas Ave.  
Topeka, KS 66612  
Office (785) 296-4219  
Fax (785) 296-2548  
ethics.kansas.gov

This is a (Check one)  **Party Committee**  **PAC**

This is an (Check one)  **Initial Appointment**  **Amended Statement**

**Committee** Name: **Thomas County Republican Central Committee**

Address: **310 W 6th St.**

Address2:

City: **Colby** State: **KS** Zip: **67701**

Business Phone: **(785) 460-6548**

Email Address: **faber30@yahoo.com**

**Chairperson** Name: **Joshua Faber**

Address: **310 W. 6th St**

Address2:

City: **Colby** State: **KS** Zip: **67701**

Home Telephone: **(785) 460-6548** Business Phone:

Email Address: **faber30@yahoo.com**

**Treasurer** Name: **MARK WOOD**

Address: **220 E WALNUT ST**

Address2: **P.O. Box 159**

City: **Colby** State: **KS** Zip: **67701**

Home Telephone: Business Phone: **(785) 443-2378**

Email Address: **markawood60@gmail.com**

**Affiliated or** Name: **Kansas Republican Party**

**Connected** Address: **P.O. Box 4157**

**Organizations** Address2: **2605 SW 21st St.**

City: **Topeka** State: **KS** Zip: **66604**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

**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.**

Executed on:

Date: **10/19/2020 10:38:24 AM** Signature of Chairperson: **Mark A Wood, Treasurer**

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DEC 04 2018

KRIS W. KOBACH  
SECRETARY OF STATE

### 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 Thomas County Republican Central Committee

Mailing Address (Street, City, State, Zip Code)  
310 W 6th St Colby, KS 67701

Business Telephone  
( 785 ) 460-6548

#### CHAIRPERSON

Name Joshua Faber

Home Telephone  
( 785 ) 460-6548

Mailing Address (Street, City, State, Zip Code)  
310 W 6th St. Colby, KS 67701

Business Telephone  
( )

#### TREASURER

Name Mark Wood

Home Telephone  
( 785 ) 443-2378

Mailing Address (Street, City, State, Zip Code)  
220 E. Walnut St. Colby, KS 67701

Business Telephone  
( )

#### AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Mailing Address (Street, City, State, Zip Code)

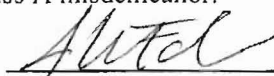
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

#### 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."

11-27-18

(Date)

  
\_\_\_\_\_  
(Signature of Chairperson)