## AFFIDAVIT OF EXEMPTION FROM FILING RECEIPTS AND EXPENDITURES REPORTS BY A PARTY COMMITTEE OR POLITICAL ACTION COMMITTEE DEC 26 2023

IF YOUR COMMITTEE RECEIVED OR EXPENDED OR CONTRACTED TO EXPEND \$500 OR MORESTEEN YEAR 2023 OR IF YOUR COMMITTEE RECEIVED A CONTRIBUTION IN EXCESS OF \$50 FROM ANY ON CONTRIBUTOR, THIS FORM MAY NOT BE USED.

Instructions: This form may be used by the treasurer of any party committee or political action committee which qualifies for the exemption.

THIS AFFIDAVIT MUST BE FILED WITH THE SECRETARY OF STATE (120 SW 10th, 1st Floor Memorial Hall, TOPEKA, KANSAS

66612) PRIOR TO JANUARY 10, 2024. If a party or political action committee qualifies for this exemption, a Statement of Organization still must be filed and the treasurer must maintain the required records. (K.S.A. 25-4145)
PLEASE PRINT OR TYPE  A. Name of Committee LINCOIN COUNTY REPUBLICAN COMMITTEE
Address 209 8, NOVAN St. City LINCOLN, KS Zip Code 17455
Telephone <u>185-524-10085</u>
B. Name of Treasurer Katie J. GOOd
Address 2000 N. 270th Rd. City Barnard, KS Zip Code 67418
Home Telephone 785-524-1000 Business Telephone N/A
C. Affidavit: State of Kansas County of LINCOLN
I, Katie J. 6000, treasurer of the
LINCOIN COUNTY REPUBLICAN COMMITTEE do swear (or affirm) that: (Name of Party or Political Action Committee)
<ol> <li>The information in Items A and B above is true and correct;</li> <li>In the non-election year to which this affidavit applies, the above party or political action committee expended or contracted to expend, an aggregate amount or value of less than five hundred dollars (\$500);</li> <li>In the non-election year to which the affidavit applies, the above party or political action committee received contributions in an aggregate amount or value of less than five hundred dollars (\$500);</li> <li>In the non-election year to which this affidavit applies, the above party or political action committee received no contributions in an aggregate amount or value in excess of fifty dollars (\$50) from any one contributor.</li> </ol>
(Date) (Signature of Treasurer)
Subscribed and sworn to (affirmed) before me this 20th day of 10cember , 20 23
NOTARY PUBLIC-State of Kansas  ANGELA K. CORPSTEIN  My Appl. Exp. 7 8 2025  My Appointment Expires 7 8 , 20 25
Governmental Ethics Commission  My Appointment Expires