

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          |

**RECEIVED**  
 OCT 18 2022  
 SCOTT SCHWAB  
 SECRETARY OF STATE

COMMITTEE (PLEASE TYPE OR PRINT)

Name Ness County Republican Committee

Mailing Address (Street, City, State, Zip Code) 22042 20 Rd Ness City, KS 67560 Business Telephone (620) 952-2562

CHAIRPERSON

Name Brandi Reinert Home Telephone (620) 952-2562

Mailing Address (Street, City, State, Zip Code) 22042 20 Rd Ness City, KS 67560 Business Telephone ( )

TREASURER

Name Kristol King Home Telephone (785) 798-0415

Mailing Address (Street, City, State, Zip Code) 105 S. Depot St. Ness City, KS 67560 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."

10/16/22 (Date)

Brandi Reinert (Signature of Chairperson)