## STATEMENT OF ORGANIZATION

DEC 02 2022

## FOR POLITICAL ACTION COMMITTEES AND PARTY COM

		(See Reverse Side F	or Instr	uctions)	
	This is a (check one)	✓ Party Committee		Political Action Committee	
	This is an (check one)	Initial Statement	t 🗀	Amended Statement	
COMMITTE	3	(PLEASE TYPE	OR PR	NT)	
Name Sedgv	vick County Republi	can Central Comm	ittee		
Mailing Address (Street, City, State, Zip Code) 435 N. Broadway St., Wichita KS 67202				Business Telephone (316 ) 636-7431	
CHAIRPERS	ON				
Name Deb L	ucia			Home Telephone ( 989 ) 859-9450	
Mailing Address (Street, City, State, Zip Code) 7302 W. Reflection Ct., Wichita, KS 67205				Business Telephone	
TREASURER					
Name Tonya	Buckingham			Home Telephone (316) 648-3530	
Mailing Addre 2317 E. Ga	ess (Street, City, State ary, Park City, KS 6	, Zip Code) 7219		Business Telephone	
AFFILIATED	OR CONNECTED C	RGANIZATIONS			,
Name				***	
Mailing Addre	ess (Street, City, State	, Zip Code)			
If not connected	or affiliated with an org	ganization, identify the	trade, p	profession, or primary interest of	the contributors.
SIGNATURE	:				
"I declare that belief is true, o	this statement has bee	I understand that the	intentio	e best of my knowledge and onal failure to file this documen	nt
11 23 22 Date)	_		X	f Chairperson)	
(Date)	Ethics Commission	(Sign	nature o	T Chairperson)	Rev.2000