

**STATEMENT OF ORGANIZATION**  
**FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES**

**RECEIVED**  
**FEB 15 2022**  
 KS Governmental Ethics Commission

(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 <i>Wichita County Republican Central Committee</i>	
Mailing Address (Street, City, State, Zip Code) <i>209 S. Indian Rd Leoti KS 67861</i>	Business Telephone <i>(620) 375-4110</i>

CHAIRPERSON

Name <i>James V. Myers</i>		Home Telephone <i>(620) 375-4110</i>
Mailing Address (Street, City, State, Zip Code) <i>209 S. Indian Rd Leoti KS 67861</i>	Business Telephone <i>(620) 376-8430</i>	

TREASURER

Name <i>Rita Ann Wiles</i>		Home Telephone <i>(620) 874-0209</i>
Mailing Address (Street, City, State, Zip Code) <i>111 N. Jones Ave. Leoti, KS 67861</i>	Business Telephone <i>( ) ( )</i>	

AFFILIATED OR CONNECTED ORGANIZATIONS

Name <i>N/A</i>
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.  
*None*

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."

*2-15-2022*  
(Date)

*[Signature]*  
(Signature of Chairperson)