	RECEIVED
STATEMENT OF ORGANIZA	ATION JAN 27 2014
FOR POLITICAL ACTION COMMITTEES AND	PARTY COMMITTEESommiss
(See Reverse Side For Instructions	s)
This is a (check one)  Party Committee  Politic	cal Action Committee
This is an (check one) Initial Statement 🖌 Ame	nded Statement
COMMITTEE (PLEASE TYPE OR PRINT)	
Name Republican House Campaign Committee	
Mailing Address (Street, City, State, Zip Code)EKS Republican Party P.O. Box 4157 Topeka, KS 66604(	Business Telephone
CHAIRPERSON	
	ome Telephone 316 ) 260-3663
	Business Telephone B16 ) 945-2277
TREASURER	
	ome Telephone
	316 ) 582-5268
Mailing Address (Street, City, State, Zip Code)B14512 Horton, Overland Park, KS, 66223(	Business Telephone
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name	
Mailing Address (Street, City, State, Zip Code)	
f not connected or affiliated with an organization, identify the trade, profession	on, or primary interest of the contributors.
SIGNATURE: I declare that this statement has been examined by me and to the best o belief is true, correct and complete. I understand that the intentional fail	
or intentionally filing a false document is a class A misdemeanor?	D - 0
(Date) (Signature of Chair	person)
Sovernmental Ethics Commission	Rev.2000

STATEMENT OF ORGANIZATION	
FOR POLITICAL ACTION COMMITTEES AND PARTY COMMIT	TEES
(See Reverse Side For Instructions)	APR 1 1 2011
This is a (check one) Party Committee Political Action Committee	APRIIS
This is an (check one) Initial Statement Amended Statement	CRETARY OF ST
COMMITTEE (PLEASE TYPE OR PRINT)	KRIS W KOBACH
Name Republica House Carpain Cainitia	
Mailing Address (Street, City, State, Zip Code) Clo Ks Republican Party P.O. Bax 4157 () Toreka, Ks 6 6664	
Toleka, KS ( 6604	
CHAIRPERSON	
Name Home Telephone Lance Kinzer (917) 829-6407	
Mailing Address (Street, City, State, Zip Code)Business Telephone12549 SBrengton, Olgtsp KS66062(913)782-5885	
TREASURER	
Name Home Telephone Marcin KLeeb (913) 681-9135	
Mailing Address (Street, City, State, Zip Code)Business Telephone14206 EBY OVER 10-1 Project K56624(913)707-4535	
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name	
Mailing Address (Street, City, State, Zip Code)	
f 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."	
4/8/11 752	
(Date) (Signature of Chairperson)	
Governmental Ethics Commission	Rev.2000