STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	☑	Party Committee	☐	Political Action Committee
This is an (check one)	☑	Initial Statement	☐	Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name: Wabaunsee County Republican Central Committee	
Mailing Address (Street, City, State, Zip Code): c/o Rosalia Hoffman, 613 Prairie Ave, Maple Hill, KS 665(	Business Telephone: (785) 320-3154

CHAIRPERSON

Name: Linda Highland	Home Telephone: (785) 456-5799
Mailing Address (Street, City, State, Zip Code): 27487 Wells Creek Rd, Wamego, KS 66547	Business Telephone: ( ) n/a

TREASURER

Name: Rosalia Hoffman	Home Telephone: (785) 320-3154
Mailing Address (Street, City, State, Zip Code): 613 Prairie Ave, Maple Hill, KS 66507	Business Telephone: (n/a)

AFFILIATED OR CONNECTED ORGANIZATIONS

Name: Kansas Republican Party
Mailing Address (Street, City, State, Zip Code): 800 SW Jackson St., Suite 1300 · Topeka, KS 66612

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."

10/1/24
(Date)

Linda Highland
(Signature of Chairperson)