FEC

Only

STATEMENT OF

PAGE 1/9

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Kansas Republican Party PO Box 14004 ADDRESS (number and street) (Check if address is changed) Lenexa 66285 KS CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address rp3@axcapteam.com is changed) Optional Second E-Mail Address roger@kansas.gop COMMITTEE'S WEB PAGE ADDRESS (URL) www.kansas.gop (Check if address is changed) DATE 30 2025 C00004606 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Lomshek, Roger, , Date 07 30 2025 Signature of Treasurer Lomshek, Roger, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	tion below.)
(b) This committee is an authorized committee, and is NOT a principal campaign comminformation below.)	ittee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate	President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized col	mmittee.
Name of Candidate	
Party Committee:	
(d) X This committee is a STA (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on li	ne 6.) Its connected organization is a:
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a scommittee. (i.e., nonconnected committee)	separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6	6.)
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution a	ccounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net process committees or committees of a feet of the committee of the committee of a feet of the committee of	·
(j) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal car	· · · · · · · · · · · · · · · · · · ·
Committees Participating in Joint Fundraiser	
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	FEC Form 1 (Revised 0	2/2009)		Page 3
V	Irite or Type Committee Name			
	Kansas Republic	an Party		
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fu	ındraising Representati	ve, or Leadership PAC Sponsor
	Team Estes			
	Mailing Address	PO Box 30844		
		Bethesda	MD	20824-0844
		CITY ▲	STATE	▲ ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising Represe	entative Leadership PAC Sponso
7.	Custodian of Records: Identifution books and records.	fy by name, address (phone number option	al) and position of the per	son in possession of committee
	Lomshek, F	loger, , ,		
	Full Name			
	Mailing Address	PO Box 4157		
		Topeka	KS	66604-0157
		CITY ▲	STATE	▲ ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number	202 866 8229
8.	Treasurer: List the name and any designated agent (e.g., a	l address (phone number optional) of the ssistant treasurer).	treasurer of the commit	tee; and the name and address of
	Full Name Lomshek, F	loger, , ,		
	or freasurer	PO Box 4157		
	Mailing Address	FO BOX 4137		
		Topeka	KS KS	66604-0157
	Title on Decition	CITY ▲	STATE	▲ ZIP CODE ▲
	Title or Position ▼ Treasurer		Telephone number	202 - 866 - 8229

Full Name of Designated	
Agent	
Mailing Address	
	P CODE ▲
Title or Position ▼	
. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds ac safety deposit boxes or maintains funds.	ccounts, rents
Name of Bank, Depository, etc.	
Fidelity State Bank Mailing Address 600 S Kansas 100 S Kansa	
Topeka KS 66603	-
CITY ▲ STATE ▲ ZIF	P CODE ▲
Name of Bank, Depository, etc.	
ChainBridge Bank	
Mailing Address 1445-A Laughlin Avenue	
McLean VA 22101	
CITY ▲ STATE ▲ ZIF	CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	C/O RED CURVE SOLUTIONS		
	138 CONANT STREET, 2ND FLOOR		
	BEVERLY	MA	01915
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	CITY A	STATE A	ZIP CODE A
Designated Agent: Ident Full Name Mailing Address	CITY A	STATE A	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or necessity.	CITY A CITY A pries: List all banks or other depositories in which	elephone Number	
Pesignated Agent: Identification of Bank, Depository, etc.	CITY ▲ CITY ▲ Ories: List all banks or other depositories in which laintains funds. Fargo Bank	elephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	·9 · ·······		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Spons
Team Marshall II			
Mailing Address	PO Box 26141		
Deletienskie	Alexandria	VA	22313
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Joint by by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC Sp
		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc. Eagle	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds. Bank	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Laturner Victory Fund	d 		
Mailing Address	PO Box 67237		
	Topeka	, , KS	66667-0237
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	runuraising nepresent	Leadership The G
		Tunuraising nepresent	
esignated Agent: Identif		Trundraising Represent	
esignated Agent: Identif		Truitialising Representation	
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material boxes or material and the second position of Bank, epository, etc	y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which aintains funds. Bank	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
Name of Any Connected TRUMP 47 COMMIT	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 509		
	ARLINGTON	VA	22216
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Affiliated Committee X Jointy by name, address (phone number – optional)	nt Fundraising Representa	
			tive Leadership PAC Spo
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi			
Designated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or many safety	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	city by name, address (phone number – optional) CITY CITY City Dries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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2	<u> </u>			FEC II	O number	С	
3.				FEC II	O number	С	
4.				 FEC II	O number	С	
lame of	Any Connected	Organization Affil	iated Committee, Joint	Fundraising Po	orocontative	or Loadorchin	PAC Snone
	CVICTORY						
Mai	iling Address	228 S WASHING	STON ST				
		WASHINGTON			DC	22314	-
	- 4! - !- ·		CITY A		STATE A	ZIP (CODE A
		Organization by name, address	Affiliated Committee	Joint Fundraisin	g Representa	ative Leaders	hip PAC Sp
	Connected				g Representa	ative Leaders	hip PAC Sp
esignat	Connected				g Representa	ative Leaders	hip PAC Sp
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esignat Full N Mailir	Connected red Agent: Identify Name	by name, address		nal)	g Representa	Leaders ZIP CC	