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RON THORNBURGH
SECRETARY OF STATE

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STATEMENT OF ORGANIZATION

Governmental Ethics Commission
109 WEST 21ST STREET
TOPEKA, KANSAS 66612

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input type="checkbox"/> Party Committee	<input checked="" type="checkbox"/> Political Action Committee
This is an (check one)	<input type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

COMMITTEE

(PLEASE TYPE OR PRINT)

Name <i>Topeka Federation of Labor</i>	
Mailing Address (Street, City, State, Zip Code) <i>1620 NW Gage 66618</i>	Business Telephone ()

CHAIRPERSON

Name <i>James D Grunewald</i>	Home Telephone <i>(785) 266-7121</i>
Mailing Address (Street, City, State, Zip Code) <i>308 Armagh Topeka, KS 66611</i>	Business Telephone <i>(785) 232-1761</i>

TREASURER

Name <i>DAN WOODARD</i>	Home Telephone <i>(785) 862-9097</i>
Mailing Address (Street, City, State, Zip Code) <i>2341 SE 53 TOPEKA, KS 66609</i>	Business Telephone <i>(785) 228-5112</i>

AFFILIATED OR CONNECTED ORGANIZATIONS

Name
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.

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."

12-19-05
(Date)

[Signature]
(Signature of Chairperson)