REVE

STATEMENT OF ORGANIZATION

FEB 13 200

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEE

		(See Reverse Side For Inst	ructions)	
	This is a (check one)	Party Committee	Political Action Committee	
	This is an (check one)	Initial Statement	Amended Statement	
COMMITTEE		(PLEASE TYPE OR PR	INT)	
Name				
Lawrence	Professional	Fire fighters Polit	real Action Committee	ie
Mailing Addre	ss (Street City State	Zin Code)	Business Telephone	
746 Kentor	Ey Garace,	CS 66044	(185) 832 7620	
CHAIRPERSC)N			
Name Eclasare	of F Magnes	(Home Telephone (785) 842-1401	
Mailing Addres	ss (Street, City, State,	Zip Code)	Business Telephone	
1029 Star	reridge Drive	Faviruce KS 66049	(785) 832-7630	
TREASURER				
Name	92 07		Home Telephone	
William	R. Brickell		(785) 842-675	3
Mailing Addres	s (Street, City, State,		Business Telephone (785) 832 - 3176	
	OR CONNECTED O			
Name	/			
Internation	al Association o	f Fire Fighters Le	cal 1596	
Mailing Addres	s (Street, City, State,	Zip Code)		
746 Kent	ricky Lysiene	2. KS 66044		
	1			
f not connected o	r affiliated with an org	anization, identify the trade, p	rofession, or primary interest of	the contributors.
-			· ,	
SIGNATURE:		4,		
"I declare that th	is statement has been	examined by me and to the	best of my knowledge and	
			nal failure to file this documer	ıt
		it is a class A misdemeanor		
2-3-4		5112	Loon	
(Date)		(Signature o	f Chairperson)	
Parrammantal Es	hica Commission		0.000	D av. 2000