JUL 2 1 2004 STATEMENT OF ORGANIZATION

Repsens

FOR POLITICAL COMPUTTING AND BARTY COMPUTTING
FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES
SECRETARION (S. B. B. S.
(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 ,
Emporia Association of Firefighter's Local 818
Mailing Address (Street, City, State, Zip Code) Business Telephone
P.O. Box 566 Emporia Ks 66801 (620) 340 - 5356
CHAIRPERSON
Name Home Telephone
Russel K. Stukey (620) 392 - 5644
Mailing Address (Street, City, State, Zip Code) Business Telephone
311. E. Exchange Ford Ks (620) 340-5356
TREASURER
Name Reandon Beck (620) 342 - 1/0/04
Mailing Address (Street, City, State, Zip Code) 820 Grove Business Telephone (620) 342- /664
020 13-12 100-1
AFFILIATED OR CONNECTED ORGANIZATIONS
Name
Emporia Association of Firefighter's Local 818
Mailing Address (Street, City, State, Zip Code)
P.O. Box 5/ele Emporia KS 6/0801
THE THE STATE LINDER IN AS CHOOLED
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."
1-1-04 Kussel States
(Date) (Signature of Chairperson)
Governmental Ethics Commission Rev.2000