JUL 2 5 2005 STATEMENT OF ORGANIZATION

1	ANSUSGH -				10 17
FOR POI		ON COMMITTE	ES AND PA		MITTEES.
_		(See Reverse Side For	Instructions)		101 1 2 2005
Г	This is a (check one)	Party Committee	Political Act	ion Committe	wammantai Ethios Commiss
	This is an (check one)	Initial Statement	Amended S	tatement	109 WEST STH STREET TOPEKA, KANSAS 68612
COMMITTEE		(PLEASE TYPE OF	R PRINT)		
Name Pl And	NEN PARENT	AMOCA	TES MOKA	AN PAC	
Mailing Address (Street, City, State, Zip Code) Business Telephone					
L 4401 W. 109 th St. SINTE 200 (9B) 312-5100					
OVEL	LAND PARK	KS 66211			
Name	50 W.C. 4044200 By		Home T	elephone	
	MAURO, JR.) 333 -1	
Mailing Address	(Street, City, State,	Zip Code)	Busine	ss Telephone	816.545-3187
7401 W-109	The St, OVERLAN	UD PARK, KS 66	,211 (45).312-51	00 2 2 3
TREASURER					
Name SHAR	PON HOFFM	AN!	a comment	elephone) 221-0	1920
Mailing Address (Street, City, State, Zip Code) Business Telephone 4401 W.109th St OVERLAND PARK, KS (de2)(
	R CONNECTED O		5		
Name					
PLANNED PARENTHOOD OF KANSAS & MID-MISSOURI					
Mailing Address (Street, City, State, Zip Code)					
4401 W.109th St., STE 200, 66211					
If not connected or	affiliated with an orga	mization, identify the tra	de, profession, or	primary intere	st of the contributors.
belief is true, com	rect and complete. I	examined by me and t understand that the int it is a class A misdeme	entional failure to anor."	file this doc	ument
(Date) (Signature of Chairperson)					

Governmental Ethics Commission

Rev.2000