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STATEMENT OF ORGANIZATION (See Reverse Side For Instructions) This is a (check one) Party Committee Political Action Committee This is an (check one) Initial Statement Mailing Address (Street, City, State, Zip Code) Mail	JUL O 3 CO	STATEMENT OF O	RGANIZATION	
(See Reverse Side For Instructions) This is a (check one) Party Committee Amended Statement Party Committee Amended Statement COMMITTEE (PLEASE TYPE OR PRINT) Name Brotherhood Bank & Trust Committee for Good Government Mailing Address (Street, City, State, Zip Code) Business Telephone 756 Minnesota Ave. Kansas City, Ks 66101 (913) 321-4242 CHAIRPERSON Name Home Telephone Newton B. Jones (919) 644-6610 Mailing Address (Street, City, State, Zip Code) Business Telephone 753 Minnesota Ave, Kansas City, Ks 66101 (913) 371-2640 TREASURER Name Home Telephone (913) 449-9050 Mailing Address (Street, City, State, Zip Code) 756 Minnesota Ave. Kansas City, Ks 66101 (913) 321-4242 AFFILIATED OR CONNECTED ORGANIZATIONS Name International Brotherhood of Boilermakers, Iron Ship Builders, Blacksmit Enterpris & Halpars Mailing Address (Street, City, State, Zip Code) 753 Minnesota Ave., Kansas City, Ks 66101 If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributor 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 ffle this document	SECREOR PO	DLITICAL ACTION COMMITT	TEES AND PARTY COMMITTEES	
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(Date) (Signature of Chairperson)	"I declare that the belief is true, cor	rrect and complete. I understand that the ifiling a false document is a class A misden	ntentional failure to file this document teanor.	

Governmental Ethics Commission

Rev.2000

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(Signature of Chairperson)

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