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**Campaign Finance
Statement of Organization
For Political Action Committees
And Party Committees**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is a (Check one) Party Committee PAC

This is an (Check one) Initial Appointment Amended Statement

Committee

Name: **Junction City Teachers PAC**
Address: **861 Cypress Street**
City: **Junction City** State: **KS** Zip: **66441-4003**
Business Phone: **7852382422**
Email Address: **mikeritchie@embarqmail.com**

Chairperson

Name: **Julie Stuck**
Address: **405 Vine ST**
City: **Junction City** State: **KS** Zip: **66441**
Home Telephone: **7852230128** Business Phone: **7857628920**
Email Address: **juliestuck@usd475.org**

Treasurer

Name: **Michael Ritchie**
Address: **861 Cypress ST**
City: **Junction City** State: **KS** Zip: **66441-4003**
Home Telephone: **7852382422** Business Phone: **7857174500**
Email Address: **mikeritchie@embarqmail.com**

Affiliated or Connected Organizations

Name: **Kansas-National Education Association**
Address: **715 10th AVE SW**
City: **Topeka** State: **KS** Zip: **66612-1686**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

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.

Executed on:

Date: **7/27/2008 3:45:34 PM** Signature of Chairperson: **Michael H. Ritchie**

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JUL 16 2004

RON THOMAS
SECRETARY OF STATE

STATEMENT OF ORGANIZATION

RECEIVED

JUL 14 2004

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

109 WEST 9TH STREET
TOPEKA, KANSAS 66612

(See Reverse Side For Instructions)

This is a (check one)	<input type="checkbox"/> Party Committee	<input 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 Junction City Teachers PAC	
Mailing Address (Street, City, State, Zip Code) 3119 Cedar Lane Milford, KS 66514	Business Telephone (785) 762-8920

CHAIRPERSON

Name Linda L. Brungardt	
Home Telephone (785) 463-5479	
Mailing Address (Street, City, State, Zip Code) 3119 Cedar Lane Milford KS 66514	Business Telephone (785) 238-1309 Ex. 2960

TREASURER

Name Mike Ritchie	
Home Telephone (785) 238-2422	
Mailing Address (Street, City, State, Zip Code) 861 Cypress Junction City, KS 66441	Business Telephone (785) 784-4475

AFFILIATED OR CONNECTED ORGANIZATIONS

Name Kansas NEA	
Mailing Address (Street, City, State, Zip Code) 715 SW 10th Avenue Topeka, KS 66612-1686	

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."

7-11-04

(Date)

Linda L. Brungardt
(Signature of Chairperson)