## RECEIVED

## STATEMENT OF ORGANIZATION

SEP 2 4 2007

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

		(See Reverse Side For	Instructions	s)	İ	
	This is a (check one)	Party Committee	Politic	cal Action Committee		
	This is an (check one)	Initial Statement	Ame	ended Statement		
			· · · · · · · · · · · · · · · · · · ·			
COMMITTEE (PLEASE TYPE OR PRINT)						
Name AFRICAN AMERICAN (BIACK) Democratic Concus of Wy C						
Mailing Address (Street, City, State, Zip Code)  Business Telephone						
CHAIRPERSO	)N					
Name BARI	BARA IKER	2()	H(9	ome Telephone 113)299914	4	
	ss (Street, City, State, 8 N 88 time	Zip Code) KCKS (ple)	109 (G	Business Telephone 91る)52生 ス	5/2	
TREASURER						
Name MR5	ODBBSIA :	Shelby	Ho ( <i>U</i>	ome Telephone 973)342-	6034	
Mailing Addre	ss (Street, City, State, ひょいしん		,	Business Telephone		
AFFILIATED	OR CONNECTED O	RGANIZATIONS				
Name						
Mailing Addre	ss (Street, City, State,	Zip Code)	· · ·			
If not connected of	or affiliated with an org	anization, identify the tra	de, professi	on, or primary interest	of the contributors.	
belief is true, co	his statement has been orrect and complete. I	n examined by me and to understand that the intention in a class A misdeme	entional fai anor." 1	ilure to file this docum		
(Date)		(Signati	ire of Chair	rperson)	— Pay 2000	

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FEB 21 2007	
DON THORNBURG	ATE

## STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES					
(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 Wyandotte Canty Black Democratic Concus					
Name Wyandotte Canty Black Democratic Caucus  Mailing Address (Street, City, State, Zip Code)  Business Telephone					
CHAIRPERSON					
Name Cawin Vick Home Telephone (913)481-9775					
Mailing Address (Street, City, State, Zip Code)  Business Telephone  Coty, CS  Business Telephone					
TREASURER					
Name 1 dessia M. Sheley (913) 342-6034					
Mailing Address (Street, City, State, Zip Code)  10/16 (Levyland Ave KCK5 66104 ( )					
AFFILIATED OR CONNECTED ORGANIZATIONS					
Name State Black Cours					
Mailing Address (Street, City, State, Zip Code)  364 Walker Ave ICCKS Good					
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."					
(Date) (Signature of Chairperson)					
Governmental Ethics Commission Rev.2000					