RECEIVED
STATEMENT OF ORGANIZATION UL 25 2011
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 IAff Local 135 Firefac
Mailing Address (Street, City, State, Zip Code)Business Telephone428N. StFrancis(316)263-6657
CHAIRPERSON Name Rocky Bungarner (316)6501460 Mailing Address (Street, City, State, Zip Code) Business Telephone
318 5. 4th Mulus no KS. 6 (1316) 263-6651 67110
TREASURER
Name Home Teléphone (3(6) 685-4731
Mailing Address (Street, City, State, Zip Code) <u>639</u> S. <u>Green wicht</u> KS (316) 263-6651
AFFILIATED OR CONNECTED ORGANIZATIONS
Name
Mailing Address (Street, City, State, Zip Code)
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors. $\frac{135}{135}$
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."
<u>7/2//(1</u> (Date) / (Signature of Chairperson)
Governmental Ethics Commission Rev.2000

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