

STATEMENT OF ORGANIZATION

FILE 22101
FOLIO 20

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input type="checkbox"/> Party Committee	<input checked="" type="checkbox"/> Political Action Committee
This is an (check one)	<input type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name Junction City Teachers PAC

Mailing Address (Street, City, State, Zip Code) 404 W 4th St, Junction City KS 66441 Business Telephone (785) 210-5138

CHAIRPERSON

Name Julie Ruth Johnson Home Telephone (785) 762 2046

Mailing Address (Street, City, State, Zip Code) 404 W 4th St, Junction City KS 66441 Business Telephone (785) 717 4380

TREASURER

Name Kathy Benton Home Telephone (785) 210-6438

Mailing Address (Street, City, State, Zip Code) 535 Tomcok Dr, Junction City KS 66441 Business Telephone (785) 717 4380

AFFILIATED OR CONNECTED ORGANIZATIONS

Name Junction City Education Association

Mailing Address (Street, City, State, Zip Code) PO Box 26 Milford KS 66514 c/o Cathy Ranken

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."

6-30-13 (Date)

(Signature of Chairperson)

[Print this form](#) or [Go Back](#)



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: **518 Coronado Drive**
Address2:
City: **Junction City** State: **KS** Zip: **66441**
Business Phone: **(785) 762-8920**
Email Address: **sarahkueser@usd475.org**

Chairperson

Name: **Julie Ruth Johnson**
Address: **404 W. 4th St**
Address2:
City: **Junction City** State: **KS** Zip: **66441**
Home Telephone: **(785) 762-2046** Business Phone: **(785) 717-4380**
Email Address: **juliejohnson@usd475.org**

Treasurer

Name: **Jean Johnson**
Address: **7202 Rockwood Drive**
Address2:
City: **Junction City** State: **KS** Zip: **66441**
Home Telephone: **(785) 761-2254** Business Phone: **(785) 717-4517**
Email Address: **jeanjohnson@usd475.org**

Affiliated or Connected Organizations

Name: **Kansas-National Education Association**
Address: **715 10th AVE**
Address2: **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: **10/26/2012 2:18:34 PM** Signature of Chairperson: **Julie R. Johnson**

[Print this form](#) or [Go Back](#)

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input type="checkbox"/> Party Committee	<input checked="" type="checkbox"/> Political Action Committee
This is an (check one)	<input type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

FILED
 SEP 24 2012
 KRIS W. KGRACH
 SECRETARY OF STATE

COMMITTEE (PLEASE TYPE OR PRINT)

Name Junction City Education Association	
Mailing Address (Street, City, State, Zip Code) 518 Coronado Drive, Junction City, KS 66441	Business Telephone (785) 762-8920

CHAIRPERSON

Name Julie Ruth Johnson	Home Telephone (785) 762-2046
Mailing Address (Street, City, State, Zip Code) 404 W4th St., Junction City, KS 66441	Business Telephone (785) 717-4380

TREASURER

Name Jean Johnson	Home Telephone (785) 761-2254
Mailing Address (Street, City, State, Zip Code) 7202 Rockwood Drive, Milford, KS 66514	Business Telephone (785) 717-4517

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.

Education

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."

9/18/12
(Date)

Julie Ruth Johnson
(Signature of Chairperson)

[Print this form](#) or [Go Back](#)

**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**

[Print this form](#) or [Go Back](#)