

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

RECEIVED

AUG 17 2012

COMMITTEE

(PLEASE TYPE OR PRINT)

AS CREDITED TO THE CONTRIBUTOR

Name	<i>Lawrence Police Officers Assoc. - PAC</i>		
Mailing Address (Street, City, State, Zip Code)	<i>66044</i>	Business Telephone	
<i>P.O. Box 442182 Lawrence KS</i>			

CHAIRPERSON

Name	<i>Mike McAtee</i>		
Home Telephone	()		
Mailing Address (Street, City, State, Zip Code)	<i>66044</i>	Business Telephone	
<i>P.O. Box 442182 Lawrence KS (785) 423-0693</i>			

TREASURER

Name	<i>Robert Neff</i>		
Home Telephone	<i>(785) 550-6354</i>		
Mailing Address (Street, City, State, Zip Code)	<i>66044</i>	Business Telephone	
<i>P.O. Box 442182 Lawrence KS</i>			

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	<i>Lawrence Police Officers Association</i>		
Mailing Address (Street, City, State, Zip Code)	<i>P.O. Box 442182 Lawrence KS 66044</i>		

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."

8/14/12
(Date)

MC LPOA - PAC
(Signature of Chairperson)

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

FILED

MAR 07 2012

KRIS W. KOBACH
SECRETARY OF STATE

(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

Lawrence Police Officers Association - PAC

Mailing Address (Street, City, State, Zip Code)

66044

Business Telephone

P.O. Box 442182 Lawrence, KS

CHAIRPERSON

Name

Anthony Brixius

Home Telephone

(785) 218-1737

Mailing Address (Street, City, State, Zip Code)

P.O. Box 442182 Lawrence, KS 66044

Business Telephone

TREASURER

Name

Robert Neff

Home Telephone

(785) 842-6354

Mailing Address (Street, City, State, Zip Code)

P.O. Box 442182 Lawrence, KS 66044

Business Telephone

AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Lawrence Police Officers Association

Mailing Address (Street, City, State, Zip Code)

P.O. Box 442182 Lawrence, KS 66044

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3/1/12

(Date)

Anthony Brixius

(Signature of Chairperson)

STATEMENT OF ORGANIZATION

RECEIVED

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

MAR 16 2011

(See Reverse Side For Instructions)

KS Governmental Ethics Commission

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

LAWRENCE POLICE OFFICERS ASSOC. - PAC

Mailing Address (Street, City, State, Zip Code)

PO BOX 442182 LAWRENCE, KS 66044

Business Telephone

CHAIRPERSON

Name

MIKE MCATEE

Home Telephone

Mailing Address (Street, City, State, Zip Code)

PO BOX 442182 LAWRENCE, KS 66044

Business Telephone

(785) 423-0693

TREASURER

Name

ROBERT NEFF

Home Telephone

(785) 550-6354

Mailing Address (Street, City, State, Zip Code)

PO BOX 442182 LAWRENCE, KS 66044

Business Telephone

AFFILIATED OR CONNECTED ORGANIZATIONS

Name

LAWRENCE POLICE OFFICERS ASSOC.

Mailing Address (Street, City, State, Zip Code)

PO BOX 442182 LAWRENCE, KS 66044

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3/9/11
(Date)

(Signature of Chairperson)

LPOA-PAC