

# 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

TOPEKA FEDERATION OF LABOR COPE FUND

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

P.O. Box 750073 TOPEKA, KS 66675

Business Telephone

(785) 276-9078

### CHAIRPERSON

Name

JAMES GRUNWALD

Home Telephone

(785) 266-7121

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

908 Armagh Topeka, KS 66611

Business Telephone

(785) 232-1761

### TREASURER

Name

DAN WOODARD

Home Telephone

(785) 862-9097

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

2341 S.E. 53 TOPEKA, KS. 66609

Business Telephone

(785) 228-5112

### AFFILIATED OR CONNECTED ORGANIZATIONS

Name

TOPEKA FEDERATION OF LABOR

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

P.O. Box 750073 TOPEKA, KS. 66675

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."

6-16-08

(Date)

Dan Woodard

(Signature of Chairperson)