STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES						
(See Reverse Side For Instructions)						
Thi	is is a (check one)	Party Committee		tion Committee		
	is is an (check one)	Initial Statement	Amended S	_ {		
L						
COMMITTEE (PLEASE TYPE OR PRINT)						
Name Emporia E	ducation Associa	ation PAC				
Mailing Address (Street, City, State, Zip Code) 1884 Road R, Emporia, KS 66801			Busine (620	Business Telephone (620) 341-2328		
CHAIRPERSON						
Name Erica Huggard			Home 7 (620	Home Telephone (620) 366-0426		
Mailing Address (Street, City, State, Zip Code) 1821 rd 330, Reading, KS 668			Busine (620	Business Telephone (620) 341-2365		
TREASURER						
Name Eleanor B	rownina		Home 7	Telephone) 342-3750	ł	
Mailing Address (S				ess Telephone) 341-2328		
AFFILIATED OR	CONNECTED OF	RGANIZATIONS				
Name Emporia -	National Education	on Association				
Mailing Address (\$ 19 Constitution,	Street, City, State, 2 Emporia, KS 66	•				
If not connected or af	filiated with an orga	nization, identify the t	rade, profession, or	primary interest of the	ne contributors.	
belief is true, correct	et and complete. I	examined by me and understand that the in t is a class A misdem	ntentional failure	_	t	
10-24-12 (Date)	_	///	ture of Chairperso	wc on) /)		
Governmental Ethic	s Commission	Ç - <u>U</u>	1	. 0	Rev.2000	