STATEMENT OF OF	PGANIZATION	
STATEWENT OF OROANIZATION		
FOR POLITICAL ACTION COMMITTE		
(See Reverse Side Fo	r Instructions)	)
This is a (check one) Party Committee	Political Action Committee JAN 0320	113
This is an (check one) Initial Statement	Amended Statement	
COMMITTEE (PLEASE TYPE C	KRIS W KOBAC SECRETARY OF S	CH TATE
Name		
United Teachers of Wichita Committee on Pol		
Mailing Address (Street, City, State, Zip Code) 150 S. Ida Wichita, Kansas 67216	Business Telephone (316) 262-5171	
CHAIRPERSON		
Name Randy Mousley	Home Telephone (316) 263-8450	
Mailing Address (Street, City, State, Zip Code) 2708 S. Classen Wichita, Kansas 67216	Business Telephone ( 316 ) 262-5171	
TREASURER		
Name	Home Telephone	
Scott Pittman	(316) 684-5441	
Mailing Address (Street, City, State, Zip Code) 150 S. Ida Wichita, Kansas 67211	Business Telephone (316) 262-5171	
AFFILIATED OR CONNECTED ORGANIZATIONS		
Name (1) Kansas National Education Association (2)	2) American Federation of Teachers-Kansas	
Mailing Address (Street, City, State, Zip Code) (1) 715 SW 10th Ave. Topeka, KS 66612 (A	2) 1300 S. Topeka Blvd. Topeka, KS 66612	
If not connected or affiliated with an organization, identify the t	rade, profession, or primary interest of the contributors.	
SIGNATURE: "I declare that this statement has been examined by me and belief is true, correct and complete. I understand that the in or intentionally filing a false document is a class A mixdem	ntentional failure to file this document	
<u>O2 Jan. 2013</u> (Date) (Signa	ature of Chairperson)	
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