FILED STATEMENT OF ORGANIZATION	
FILED STATEMENT OF ORGANIZATION  APEOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES  RON THORNBURGHTON (See Reverse Side For Instructions)	
APRON THORNBURGHTE  (See Reverse Side For Instructions)  SECRETARY OF STATE  This is a (check one) Party Committee Political Action Committee	
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 Johnson County Friends of Police	
Mailing Address (Street, City, State, Zip Code) PO Box 2232 Olathe, Ks 66051	Business Telephone
CHAIRPERSON	
Name Keenan Joe Langer	Home Telephone ( 913 ) 782-8950
Mailing Address (Street, City, State, Zip Code) 15024 W 145 Ter Olathe, Ks 66062	Business Telephone ( 913 ) 642-5555
TREASURER	
Name Jeffrey Bragg	Home Telephone ( 913 ) 205-2696
Mailing Address (Street, City, State, Zip Code) 12505 S. Brougham Olathe, Ks 66062	Business Telephone ( 913 ) 971-6373
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.  Law Enforcement	
SIGNATURE: "I declare that this statement has been examined by me and to the belief is true, correct and complete. I understand that the intention or intentionally filing a false document is a class A misdemeanor (Date)  (Signature of the content	onal failure to file this document
Covernmental Ribics Commission	Rev 2000