

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED

(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

AUG 02 2016

KS Governmental Ethics Commission

COMMITTEE (PLEASE TYPE OR PRINT)

Name	AFRICAN AMERICAN <del>CLUBS</del> <sup>DEMOCRATIC</sup> CAUCUS OF KANSAS	
Mailing Address (Street, City, State, Zip Code)	PO BOX 2301 TOPEKA KS 66601 ( )	
Business Telephone	( )	

CHAIRPERSON

Name	STEVEN WRIGHT	Home Telephone	(913) 269-4772
Mailing Address (Street, City, State, Zip Code)	616 E LAYTON DR OLDFREE KS 66061	Business Telephone	(913) 269-4772

TREASURER

Name	NEDRA LOCKIE	Home Telephone	(816) 520-3116
Mailing Address (Street, City, State, Zip Code)	622 WILHE CHATHE, KS 66061	Business Telephone	( )

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	KANSAS Democratic Party.		
Mailing Address (Street, City, State, Zip Code)	501 SE TEFFERSON ST SUITE 302 TOPEKA, KS 66607		

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."

8/1/2016  
(Date)

  
(Signature of Chairperson)

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

COMMITTEE (PLEASE TYPE OR PRINT)

Name	African American Democratic Caucus of KS	
Mailing Address (Street, City, State, Zip Code)	PO Box 7301 Topeka KS 66601	Business Telephone (913) 769-5203

CHAIRPERSON

Name	Steve Wright	Home Telephone (913) 769-4872
Mailing Address (Street, City, State, Zip Code)	1617 Cody St Topeka KS 66601	Business Telephone

TREASURER

Name	Arthur Easterwood	Home Telephone (913) 756-9241
Mailing Address (Street, City, State, Zip Code)	11617 Cody St Topeka KS 66601	Business Telephone

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	KANSAS Democratic Party
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

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."

06/14/2014  
(Date)

  
(Signature of Chairperson)