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**Campaign Finance
Statement of Organization
For Political Action Committees
And Party Committees**

Governmental Ethics Commission
901 S. Kansas Ave.
Topeka, KS 66612
Office (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is a (Check one) Party Committee PAC

This is an (Check one) Initial Appointment Amended Statement

Committee Name: **Lawrence Educators PAC**
Address: **756 Elm St.**
Address2:
City: **Lawrence** State: **KS** Zip: **66044**
Business Phone:
Email Address: **blake.swenson@usd497.org**

Chairperson Name: **Blake Swenson**
Address: **756 Elm**
Address2:
City: **Lawrence** State: **KS** Zip: **66044**
Home Telephone: Business Phone:
Email Address: **blake.swenson@usd497.org**

Treasurer Name: **John Bode**
Address: **1530 New Hampshire St.**
Address2:
City: **Lawrence** State: **KS** Zip: **66044**
Home Telephone: **(785) 843-8511** Business Phone:
Email Address: **bode@sunflower.com**

**Affiliated or
Connected
Organizations** Name: **Lawrence Education Association**
Address: **1901 Louisiana St.**
Address2:
City: **Lawrence** State: **KS** Zip: **66046**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.
This PAC represents teachers and paraeducators who are employed by the Lawrence Public Schools and are members of the Lawrence Education Association

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.

Executed on:

Date: **7/16/2018 12:42:57 PM** Signature of Chairperson: **Blake Swenson**

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STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED
JUL 17 2017
KS GOVT

(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

FILED
JUL 14 2017
KRIS W. KOBACH
SECRETARY OF STATE

COMMITTEE (PLEASE TYPE OR PRINT)

Name Lawrence Educators PAC	
Mailing Address (Street, City, State, Zip Code) 1530 New Hampshire St., Lawrence, KS 66044	Business Telephone (785) 843-8511

CHAIRPERSON

Name John Bode	Home Telephone (785) 843-8511
Mailing Address (Street, City, State, Zip Code) 1530 New Hampshire St., Lawrence, KS 66044	Business Telephone (785) 843-8511

TREASURER

Name John Bode	Home Telephone (785) 843-8511
Mailing Address (Street, City, State, Zip Code) 1530 New Hampshire St., Lawrence, KS 66044	Business Telephone (785) 843-8511

AFFILIATED OR CONNECTED ORGANIZATIONS

Name Lawrence Education Association (LEA)
Mailing Address (Street, City, State, Zip Code) Attn: Laurie Folsom, 1901 Louisiana St., Lawrence KS 66046-2938

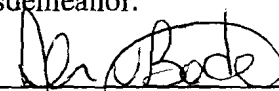
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.
We represent Lawrence Kansas teachers, para-professionals, and certified employees employed by the Lawrence Public Schools and represented by the Lawrence Education Association

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."

7/11/17

(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

REC'D
JUL 27 2015

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Lawrence Teachers PAC	
Mailing Address (Street, City, State, Zip Code)	Business Telephone	
1530 New Hampshire St. Lawrence, KS 66044	(785) 843-8511	

CHAIRPERSON

Name	Home Telephone
John Bode	(785) 843-8511
Mailing Address (Street, City, State, Zip Code)	Business Telephone
1530 New Hampshire St. Lawrence, KS 66044	(785) 330-1641

TREASURER

Name	Home Telephone
John Bode	(785) 841-8511
Mailing Address (Street, City, State, Zip Code)	Business Telephone
1530 New Hampshire st., Lawrence, KS 66044	(785) 330-1641

AFFILIATED OR CONNECTED ORGANIZATIONS

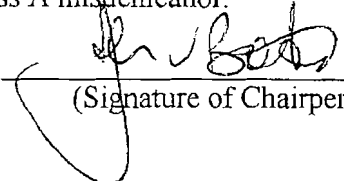
Name
Lawrence Education Association
Mailing Address (Street, City, State, Zip Code)
Lawrence High School, 1901 Louisiana St. Lawrence, KS 66044

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7/24/2015
(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 type="checkbox"/> Amended Statement

RECEIVED
 JUL 28 2014
 KRIS W KOEACH
 SECRETARY OF STATE

COMMITTEE (PLEASE TYPE OR PRINT)

Name Charlotte Anderson - LEA President

Mailing Address (Street, City, State, Zip Code) Business Telephone
1929 Ohio Lawrence, KS 66046 (785) 330-1430

CHAIRPERSON

Name Lawrence Education Assn PA, Cell Home Telephone (785) 691-9054

Mailing Address (Street, City, State, Zip Code) Business Telephone
3 1929 Ohio Lawrence KS 66046 (785) 330-1430

TREASURER

Name John Bode Home Telephone ()

Mailing Address (Street, City, State, Zip Code) Business Telephone
70 New York School () 832-5000

AFFILIATED OR CONNECTED ORGANIZATIONS

Name KNEA - state LEA - local

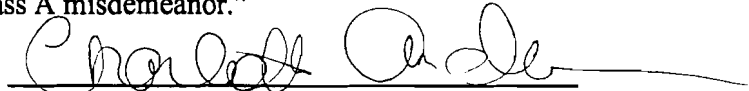
Mailing Address (Street, City, State, Zip Code)
715 SW 10th Ave Topeka KS 66612

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."

7/18/2014
(Date)


(Signature of Chairperson)