

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	PLUMBERS & PIPEFITTERS LOCAL UNION #441 POLITICAL ACTION COMMITTEE	
Mailing Address (Street, City, State, Zip Code)	1330 E 1ST ST N, STE 115 WICHITA KS 67214-4000	Business Telephone (316) 265-4291

CHAIRPERSON

Name	BRIAN R. BURNETT	Home Telephone (316) 210-3998
Mailing Address (Street, City, State, Zip Code)	1330 E 1ST ST N, STE 115 WICHITA KS 67214-4000	Business Telephone (316) 265-4291

TREASURER

Name	STEVEN E. WATSON	Home Telephone (316) 239-7127
Mailing Address (Street, City, State, Zip Code)	1330 E 1ST ST N, STE 115 WICHITA KS 67214-4000	Business Telephone (316) 265-4291

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	PLUMBERS & PIPEFITTERS LOCAL UNION #441	
Mailing Address (Street, City, State, Zip Code)	1330 E 1ST ST N, STE 115 WICHITA KS 67214-4000	

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."

7-5-17
(Date)

(Signature of Chairperson)