

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

COPE / WICHITA HUTCHINSON LABOR FEDERATION

Mailing Address (Street, City, State, Zip Code)

3340 W. DOUGLAS KS, 67203

Business Telephone

(316) 941-4061

CHAIRPERSON

Name

SUSAN THOMPSON

Home Telephone

(316) 633-0632

Mailing Address (Street, City, State, Zip Code)

Business Telephone

(316) 522-1591

TREASURER

Name

ESAU A. FREEMAN

Home Telephone

(316) 617-1581

Mailing Address (Street, City, State, Zip Code)

Business Telephone

(316) 617-1581

AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Local AREA LABOR ORGANIZATIONS Affiliated with AFL-CIO

Mailing Address (Street, City, State, Zip Code)

3340 W. DOUGLAS 67203 WICHITA KS.

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."

7-13-2017

(Date)


(Signature of Chairperson)