

STATEMENT OF ORGANIZATION

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DEC 16 2019

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

SECRETARY OF STATE

(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

COMMITTEE (PLEASE TYPE OR PRINT)

Name Shawnee County Industrial Union Committee

Mailing Address (Street, City, State, Zip Code) 1603 NW Taylor St., Topeka, Ks. 66608

Business Telephone (785) 234-5688

CHAIRPERSON

Name Jon Workman

Home Telephone ()

Mailing Address (Street, City, State, Zip Code) 1603 NW Taylor St., Topeka, Ks. 66608

Business Telephone (785) 234-5688

TREASURER

Name Curtis Campbell

Home Telephone ()

Mailing Address (Street, City, State, Zip Code) 1603 NW Taylor St., Topeka, Ks. 66608

Business Telephone (785) 234-5688

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. Industrial Unionw

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."

12/10/19 (Date)

(Signature of Chairperson)