

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

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DEC 20 2019
KS Governmental Ethics Commission

(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	HEARTLAND APARTMENT POLITICAL ACTION COMMITTEE	
Mailing Address (Street, City, State, Zip Code)	P.O. BOX 30097, KANSAS CITY, MO 64112	
Business Telephone	(816) 561-9958	

CHAIRPERSON

Name	MICHAEL NAPOVANICE	Home Telephone	(913) 593-6748	
Mailing Address (Street, City, State, Zip Code)	8826 SANTA FE DRIVE, #190, O.P. KANSAS 66212		Business Telephone	(913) 362-6996 x201

TREASURER

Name	SAMUEL V. ALPERT	Home Telephone	(816) 678-8723	
Mailing Address (Street, City, State, Zip Code)	P.O. BOX 30097, KANSAS CITY, MO 64112		Business Telephone	(816) 561-9958

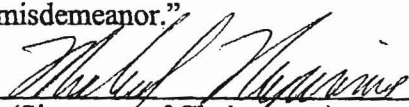
AFFILIATED OR CONNECTED ORGANIZATIONS

Name	HEARTLAND APARTMENT ASSOCIATION		
Mailing Address (Street, City, State, Zip Code)	P.O. BOX 30097, KANSAS CITY, MO 64112		

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."

12/17/19
(Date)


(Signature of Chairperson)