. 30	08 08:19a	Dr. Tom Hawk		785-537-8000	r	p. 1
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*	Tom H	awk		State Representa	ative 67	7
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ED 302 THORN	OThe report ma or by fax at 7 NB election offic CAII information Expenditures	nust be filed by 5:00 p.m. a single source of \$300 ay be filed by hand delive 85-291-3051. A copy of er by hand delivery, expra- on included on this report Report.	or more to a state ery, express deliv this report must a ess delivery or fa t must also be inc	ery, electronically wi also be filed with the x transmission. luded on the January	ith the Secreta candidate's h 10, 2009 Rec	ry of Stat ome coun eipts and
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	Date	Name and Address of Contributor		Occupation and Industry of Individual Contrib	f utor	

"I declare that this report, including any accompanying schedules and statements, 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."

10-30-08

own

Date

Signature of Candidate or Treasurer