

## APPOINTMENT OF TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR LOCAL OFFICE

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MAY 01 2008

This is an (Check one)  Initial Appointment  Amended Statement

Governmental Ethics Commission

**CANDIDATE** (Please Type or Print)

Name <i>William R. Prescott</i>		
Street <i>5928 W. 216th</i>		
City <i>Osage City</i>	County <i>Osage</i>	Zip Code <i>66523</i>
Home Telephone (785) <i>528-4586</i>	Business Telephone (785) <i>806-7649</i>	
Office Sought <i>State Representative</i>	District No. <i>59th</i>	

**TREASURER**

Date Appointed <i>April 25th 2008</i>		
Name <i>Steve Niemark</i>		
Address <i>434 Jefferson</i>	Zip Code <i>66451</i>	
City <i>Lyndon</i>		
Home Telephone (785) <i>828-3139</i>	Business Telephone (785) <i>828-4411</i>	

**OR CANDIDATE COMMITTEE**

Date Appointed <i>April 25th 2008</i>		
Chairperson's Name <i>Dorese M. Prescott</i>		
Address <i>5928 W. 216th</i>	Zip Code <i>66523</i>	
City <i>Osage City</i>		
Home Telephone (785) <i>528-4586</i>	Business Telephone (785) <i>528-3172</i>	
Treasurer's Name <i>Steve Niemark</i>		
Address <i>434 Jefferson</i>		
City <i>Lyndon</i>		
Home Telephone (785) <i>828-3139</i>	Business Telephone (785) <i>828-4411</i>	

**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."

*April 28th 2008*  
(Date)

*William R. Prescott*  
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS