APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM

THOTAL FOR CAND	DATE FOR STATE	OFFICE
This is an (Check one)	Initial Appointment	Amended Statement
CANDIDATE		
Name Bob Bethell	·	
Address 104E 3 rd	·	
City Alden 620 C	ounty Rick	Zip Code 6 751 Z
Home Telephone (36) 534-3	3085 Business Telephon	ne (3(4) 278 3651
Office Sought REPRESENTA		hild District No. 1/3
TREASURER	, a,	A.,
Date Appointed 1-17-98		
Name Description	- 54	
Address C C = N	ZER	
City /		Zip Code / ファテム
POONS	22 - 2 Proises Talanha	6 655 7
Home Telephone (316) 257 -	3809 Business Telepho	ne () .
OR CANDIDATE COMMITTI	EE	
Date Appointed		
Chairperson's Name		
Address		
City		Zip Code
Home Telephone ()	Business Telepho	·
Treasurer's Name		
Address		
City		Zip Code
Home Telephone ()	Business Telepho	
,	- Jaoineso Telepilo	
SIGNATURE		
declare that this statement has been e	examined by me and to the h	est of my knowledge and belief is
ue, correct and complete. I understand	d that the intentional failure	
ing a false document is a class A misc		
$\frac{6-(7-98)}{\text{(Date)}}$	Took,	Des h
(Date)	(Signat	ure of Candidate)
SEE REVERSE	SIDE FOR INSTRU	CTIONS
ansas Commission on Governmental	· ·	Rev. 19