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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is an (Check one) **Initial Appointment** **Amended Statement**

Candidate

Candidate Name: **Mike Laudick**
Address: **222 S St. John AVE**
City: **Lyons** Zip: **67554**
Home Phone: **6202572240** Business Phone: Cell Phone:
County: **Rice** Email Address: **dmlaudick@cox.net**
Office Sought: **State Representative** District No.: **113**

Treasurer

Date Appointed: **06/09/2008**
Treasurer Name: **Hal Snyder**
Address: **1120 S Grand AVE**
City: **Lyons** State: **KS** Zip: **67554**
Home Telephone: **6202572937** Business Phone: Cell Phone:
Email Address: **dmlaudick@cox.net**

**Candidate
Committee**

Date Appointed:
Chairperson's Name:
Address:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

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.

Executed on:

Date: **7/26/2008 11:45:40 AM** Signature of Candidate: **Mike Laudick**

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APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM

CANDIDATE FOR STATE OFFICE

FILED
 JUN 09 2008
 RON THORNBURGH
 SECRETARY OF STATE

This is an (Check one) Initial Appointment Amended Statement
 (Please Type or Print)

Name	Mike Laudick		
Street	222 So. St. John Ave.		
City	County	Zip Code	
Lyons	Rice	67557	
Home Telephone	620-257-2940	Business Telephone	316-941-3862
Office Sought	House of Representative		District No. 113

TREASURER

Date Appointed	6-9-08		
Name	Hank Snyder		
Address	1120 So Grand Ave		
City	Lyons	Zip Code	67557
Home Telephone	620-257-2937	Business Telephone	—

OR CANDIDATE COMMITTEE

Date Appointed			
Chairperson's Name			
Address			
City		Zip Code	
Home Telephone		Business Telephone	
Treasurer's Name			
Address			
City		Zip Code	
Home Telephone		Business Telephone	

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."

6-9-08 (Date) Mike M Laudick (Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS