## **APPOINTMENT OF**

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## FEASURER OR CANDIDATE COMMITTEE FORM, 28 2008

OR CANDIDATE FOR STATE OFFICE GOVERNMENTS COMMISSION

This is an (Check one) Initial Appointment Amended Statement
CANDIDATE (Please Type or Print)
Name Gene J. Schwein
Street 3492 E Rd 17
City 11145Ses County (RAWT Zip Code 61880
Home Telephone 650 -356-2519 Business Telephone 620-353-8579
Office Sought Roppesentative District No. 124
TREASURER
Date Appointed 5-22-08
Name sike Kimball
Address 204 E. GRANT
City Ulysses 125 Zip Code 67880
Home Telephone 620 356 - 3018 Business Telephone 620 356 - 3088
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
IGNATURE I declare that this statement has been examined by me and to the best of my knowledge and belief is true rrect and complete. I understand that the intentional failure to file this document or intentionally filing s se document is a class A misdemeanor."
(Signature of Candidate)
(Date) (Signature of Candidate)
SEE REVERSE SIDE FOR INSTRUCTIONS

Governmental Ethics Commission