

**APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM**

**RECEIVED
JUN 23 2010**

KS Governmental Ethics Commission

This is an (Check one)

Initial Appointment

Amended Statement

CANDIDATE

(Please Type or Print)

| | | | |
|----------------|----------------------|--------------------|-----------------|
| Name | HARRY HICKS | | |
| Street | 625 Tailgrass Dr. | | |
| City | Junction City, KS | County | Geary |
| | | Zip Code | 66441 |
| Home Telephone | 785-579-6010 | Business Telephone | 785-238-4300 |
| Office Sought | State Representative | | District No. 65 |

TREASURER

| | | | |
|----------------|-------------------------|--------------------|--------------|
| Date Appointed | 6-15-10 | | |
| Name | FLOYA LEWIS | | |
| Address | 321 W. 12 th | | |
| City | Junction City, KS. | Zip Code | 66441 |
| Home Telephone | 785-307-0272 | Business Telephone | 785-238-3599 |

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."

6/20/10
(Date)

[Signature]
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS