

Best Form
12:55 PM
6-2-04

FILED
JUN 02 2004
RON THOMPSON
SECRETARY OF STATE

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

This is an (Check one)

Initial Appointment

Amended Statement

CANDIDATE

Name	Tom Hawk		
Address	3115 Harahay Ridge		
City	Manhattan	County Riley	Zip Code: 66502
Home Telephone (785)	537-1225	Business Telephone (785)	341- 2534 162
Office Sought:	Representative	District No.:	67th

TREASURER

Date Appointed:	6-02-04		
Name:	Katha Hurt		
Address:	1927 Anderson Ave.		
City:	Manhattan	Zip Code:	66502
Home Telephone ()	776-1075	Business Telephone (785)	587-2170


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."

6-2-04
(Date)


(Signature of Candidate)