MAY-25-2010 TUE 01:23 PM DECATUR COUNTY TREASURER 785 475 8130

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TDEASUDED	
τρελειίρερ Λ	APPOINTMENT OF
TREADURER O	R CANDIDATE COMMITTEE FORMECEIVED
FOR CAN	DIDATE FOR LOCAL OFFICE MAY 25 ZUIU
· · ·	
This is an (Check one)	Initial Appointment Amended Statement
Name Robert Strevey	
Street P.O. Boy 204	
City Novestun	County Decisiun Zip Code 67653
Home Telephone 785-693-	4597 Business Telephone
Office Sought State Legi	glaton District No. 120
TREASURER	
Date Appointed Gregory	K Lohostenen 25 May 2010
Name Avenurul	K Lohoesener
Address P.O. Box 190	
City Obenlin	Zip Code 67749
Home Telophone 785-475-	2019 Business Telephone 785 - 475 - 3459
OR CANDIDATE COMMITTE	2E
Chairperson's Name	
Address	
City	Zip Code
Home Telephone	Business Tolephone
Treasurer's Name	
Address	
City	Zip Code
	Business Telephone

SEE REVERSE SIDE FOR INSTRUCTIONS

Governmental Ethics Commission

Rev.2000

APPOINTMENT OF		
APPOINTMENT OF FILED APPOINTMENT OF SUPPORTED OR CANDIDATE FOR STATE OFFICE		
JUN DE TATE FOR CANDIDATE COMMITTEE FORM		
POLETARIZE This is an (Check one) Initial Appointment Amended Statement CANDIDATE (Please Type or Print) Name Rohert G. (Streve y)		
Street 40 Box 204		
City Norestur County Decatur Zip Code 67653 Home Telephone 785-693-4597 Business Telephone		
Home Telephone 785-693-4597 Business Telephone Office Sought State Representative District No. 120		
TREASURER		
Date Appointed Greg Lohoefener 3 June 2008		
Name Greg Lohoe feher		
Address 414 E259 Commercial		
City Oberlin ZipCode 67749		
Home Telephone $785 - 475 - 20/9$ 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."		
(Date) (Date) (Date) (Signature of Candidate)		
SEE REVERSE SIDE FOR INSTRUCTIONS		

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