

**APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM
FOR CANDIDATE FOR STATE OFFICE**

RECEIVED

JUN 11 2012

This is an (Check one)



Initial Appointment



Amended Statement

Governmental Ethics Commission

CANDIDATE

(Please Type or Print)

| | | | |
|----------------|----------------------|--------------------|-----------------|
| Name | John Gotts | | |
| Street | 308 Laramie | | |
| City | Atchison | County | Atchison |
| Zip Code | 66002 | | |
| Home Telephone | 208 685 9700 | Business Telephone | same |
| Office Sought | State Representative | | District No. 63 |

TREASURER

| | | | |
|----------------|------------|--------------------|--|
| Date Appointed | 06/11/12 | | |
| Name | John Gotts | | |
| Address | | | |
| City | | Zip Code | |
| Home Telephone | | Business Telephone | |

OR CANDIDATE COMMITTEE

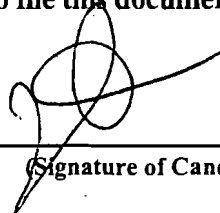
| | | | |
|--------------------|--|--------------------|--|
| Date Appointed | | | |
| Chairperson's Name | | | |
| Address | | | |
| City | | Zip Code | |
| Home Telephone | | Business Telephone | |
| Treasurer's Name | | | |
| Address | | | |
| City | | Zip Code | |
| Home Telephone | | Business Telephone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

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."

06/11/12

(Date)



(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS