## **APPOINTMENT OF**

## TREASURER OR CANDIDATE COMMITTEE FORM

FOR CANDIDATE FOR STATE OFFICE

This is an (Check one) Initial Appointment Amended Statement
CANDIDATE (Please Type or Print)
Name Scott A. Briggs
Street Q594 ROAD X
City Reports County Lyon Zip Code 66868
Home Telephone 620-699-3448 Business Telephone
Office Sought House of Representative District No. 76
TREASURER
Date Appointed m = 24, 2012
Name Don 5 Romine
Address 2389 Rd N
City Emperia 1KS Zip Code 66801
Home Telephone 620 - 343 - 1833 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, or rect and complete. I understand that the intentional failure to file this document or intentionally filing a class A misdemeanor."    Signature of Candidate   Can
SEE REVERSE SIDE FOR INSTRUCTIONS

Rev.2000

Governmental Ethics Commission