APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR STATE OFFICE

				RECEIVED	
	This is an (Check one) L Ini	tial Appointment	Amended Statement	
CANDIDATE	<u> </u>	(Please Type	e or Print)	.IIII 1 62010	
Name $\mathcal{B}_{\boldsymbol{\varepsilon}}$	any L.B.	oman		KS Govanime.	
	914 Eucl				
	· · · · · · · · · · · · · · · · · · ·	County S	Bedgwic	X Zip Code 67213	
Home Telepl	none(316) 94.	5-0771	Business Tel	ephone Same	
		epresenta		District No. 95	
TREASURER					
	ted 7-7-10)			
	, 				
Address	518 50.	Hipp Meridian	1		
				Zip Code 61213	
Home Teleph	none 3/6-9	43-7075	Business Tel	Zip Code 61713 ephone 316-522-3458	
OP CANDIDA	TE COMMITTE		. *		
Date Appoint					
Chairperson'			<u> </u>	· ·	
Address	<u> </u>		<u> </u>	<u> </u>	
City				Zip Code	
Home Teleph	one ·		Business Telephone		
Treasurer's N	Iame				
Address		-		20000	
City				Zip Code	
Home Teleph	one		Business T	elephone	
correct and con		and that the intention		est of my knowledge and belief is true this document or intentionally filing a	
7-14-	/ <u>C</u>		Bennzy	Cignature of Candidate)	

SEE REVERSE SIDE FOR INSTRUCTIONS