

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 <u>Bill Otto</u>			
Street <u>102 9th</u>			
City <u>Le Roy, KS</u>	County <u>Coffey</u>	Zip Code <u>66857</u>	
Home Telephone <u>1-20 964 2355</u>		Business Telephone	
Office Sought <u>KS House</u>		District No. <u>76</u>	

TREASURER

Date Appointed <u>May 1, 2014</u>	
Name <u>William C. Otto</u>	Assistant <u>Treas. Clerk</u>
Address <u>102 9th</u>	
City <u>Le Roy</u>	Zip Code <u>66857</u>
Home Telephone <u>620-964-2355</u>	Business Telephone

I had not ask for more but when people gave me some I opened an account.

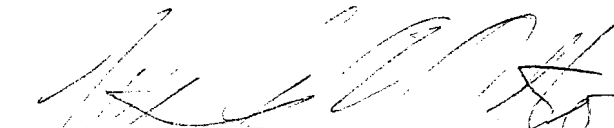
OR CANDIDATE COMMITTEE

Date Appointed <u>May 1, 2014</u>	
Chairperson's Name <u>J. Vol. Clark (daughter)</u>	
Address <u>102 9th</u>	
City <u>Le Roy, KS</u>	Zip Code <u>66857</u>
Home Telephone <u>620-964-2355</u>	Business Telephone <u>120-964-2101</u>
Treasurer's Name <u>William C. Otto</u>	
Address <u>102 9th</u>	
City <u>Le Roy, KS</u>	Zip Code <u>66857</u>
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."

July 2, 2014
(Date)


(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

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

RECEIVED

JUN 22 2012

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☐

Initial Appointment

☒

Amended Statement

CANDIDATE

(Please Type or Print)

Name	Bill Otto		
Street	102 9th		
City	LeRoy KS	County	Coffey Zip Code 66857
Home Telephone	620-964-2355	Business Telephone	620 964 2355
Office Sought	KS House	District No.	76

TREASURER

Date Appointed	Spring 04 →		
Name	Bill Otto Assistant To Voli Clark (Daughter)		
Address	102 9th		
City	LeRoy KS	Zip Code	66857
Home Telephone	620-964-2355	Business Telephone	

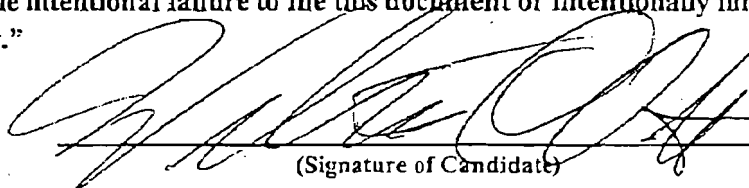
OR CANDIDATE COMMITTEE

Date Appointed			
Chairperson's Name	Bill Otto Assistant To Nita Otto wife		
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."

June 22, 2012
(Date)


(Signature of Candidate)

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