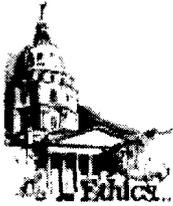


[Print this form](#) or [Go Back](#)



**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is an (Check one) **Initial Appointment** **Amended Statement**

Candidate Candidate Name: **Mark Low**
Address: **PO Box 414**
Address2:
City: **Fowler** Zip: **67844**
Home Phone: **(620) 646-5225** Business Phone: Cell Phone: **(620) 646-5225**
County: **Meade** Email Address: **marklow49@gmail.com**
Office Sought: **State Representative** District No.: **115**

Treasurer Date Appointed: **06/03/2014**
Treasurer Name: **Tom Rickard**
Address: **PO Box 771**
Address2:
City: **Meade** State: **KS** Zip: **67864**
Home Telephone: **(620) 873-8484** Business Phone: Cell Phone:
Email Address: **marklow49@gmail.com**

Candidate Committee Date Appointed:
Chairperson's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

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.

Executed on:
Date: **7/25/2014 10:15:40 AM** Signature of Candidate: **Tom Rickard**

[Print this form](#) or [Go Back](#)

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

This is an (Check one) Initial Appointment Amended Statement
(Please Type or Print)

CANDIDATE

Name Mark Low		
Street 610 Church St.		
City Fowler	County Meade	Zip Code 67844
Home Telephone 620-646-5225	Business Telephone NA	
Office Sought Kansas Rep	District No. 115	

TREASURER

Date Appointed 6/2/14		
Name Tom Rickard		
Address 605 N Park		
City Meade	Zip Code 67864	
Home Telephone 620-629-1106	Business Telephone NA	

OR CANDIDATE COMMITTEE

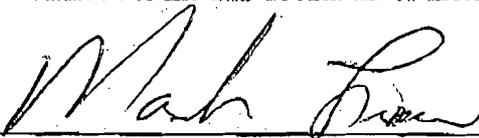
Date Appointed		
Chairperson's Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	
Treasurer's Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	

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."

June 2, 2014

(Date)



(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS