

**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	Bo Dostal		
Street	901 E WABASH		
City	OLATHE	County	JOHNSON Zip Code 66061
Home Telephone	913-712-7010	Business Telephone	
Office Sought	REPRESENTATIVE	District No.	15

**TREASURER**

Date Appointed			
Name	Bo Dostal		
Address	901 E. WABASH		
City	OLATHE	Zip Code	66061
Home Telephone	913-712-7010	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."

3-15-16  
(Date)

Bo Dostal  
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS