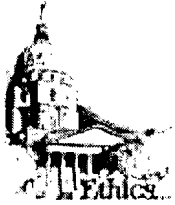


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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

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: **Boyd Orr**
Address: **30111 H Road**
Address2:
City: **Fowler** Zip: **67844**
Home Phone: **(620) 646-5557** Business Phone: Cell Phone: **(620) 646-6003**
County: **Meade** Email Address: **boydorr@gmail.com**
Office Sought: **State Representative** District No.: **115**

Treasurer Date Appointed: **02/18/2016**
Treasurer Name: **Stan Shewey**
Address: **P.O. Box 433**
Address2:
City: **Meade** State: **KS** Zip: **67864**
Home Telephone: **(620) 873-9235** Business Phone: **(620) 873-2123** Cell Phone:
Email Address: **stan@stockgrowersbank.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:
Address:
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: **5/20/2016 9:09:14 PM** Signature of Candidate: **Boyd Orr**

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APPOINTMENT OF

RECEIVED

TREASURER OR CANDIDATE COMMITTEE FORM

FILED

FEB 04 2016

MAR 04 2016

FOR CANDIDATE FOR STATE OFFICE

KRIS W. KOBACH
SECRETARY OF STATE

KS Governmental Ethics Commission

This is an (Check one)

Initial Appointment

Amended Statement

CANDIDATE

(Please Type or Print)

Name	Boyd Orr				
Street	30111 H Rd				
City	Fowler	County	Meade	Zip Code	67844-9122
Home Telephone	620-646-5557	Business Telephone	620-646-6003		
Office Sought	State Representative		District No.	115	

TREASURER

Date Appointed	2-18-2016				
Name	STAN SHEWENY				
Address	P.O. Box 433				
City	MEADE, KS	Zip Code	67864		
Home Telephone	620-873-9235	Business Telephone	620-873-2123		

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."

2-18-2016
(Date)

Boyd Orr
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS