

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

**FILED**  
MAY 24 2022  
SCOTT SCHWAB  
SECRETARY OF STATE

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

**CANDIDATE**

Name	John Lowrance		
Mailing Address	119 S. 12th St.		
City	County	Zip Code	
Independence	Montgomery	67301	
Telephone	316-305-2309	Email	john.lowrance.2022@yahoo.com
Office Sought	Representative		District No. 11

**TREASURER**

Date Appointed	5/20/2022		
Name	John Lowrance		
Mailing Address	119 S. 12th St.		
City	County	Zip Code	
Independence	Montgomery	67301	
Telephone	316-305-2309	Email	john.lowrance.2022@yahoo.com

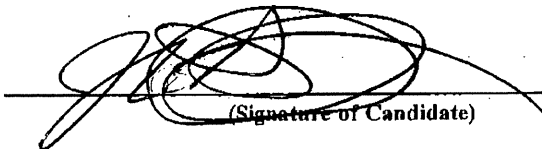
**OR CANDIDATE COMMITTEE**

Date Appointed			
Chairperson's Name			
Mailing Address			
City	County	Zip Code	
Telephone		Email	
Treasurer's Name			
Mailing Address			
City	County	Zip Code	
Telephone		Email	

**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."

5/20/2022  
(Date)

  
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS