APPOINTMENT OF TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR STATE OFFICE Initial Appointment Amended Statement This is an (Check one) CANDIDATE (Please Type or Print) Name ebstar County Wyandotte Zip Code Home Telephone Business Telephone District No. # Office Sought Distric TREASURER Date Appointed Name Address Zip Code 66106 Home Telephone 91 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."

(1/2070)

(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

Governmental Ethics Commission

Rev.2000