APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR LOCAL OFFICE

This is an (Check one) Initial Appointm		nent
NT 1 / A	(Please Type or Pri	nt)	
Mailing Address	130× 184		
City Ladall	c . /\ \	Zip Code 🖙	7146
Telephone 316-68	TO COUNTRY	The second secon	
	P-10 24 - Keyler	<u>Buoheatistate « C</u> District No.	~6 <i>1</i> 173
- 11 EU	>M/ E/		
TREASURER			
Date Appointed			
Name S	eK.		
Mailing Address			
City		Zip Code	
Telephone	Email		
Mailing Address			
Chairperson's Name			
City		72:- C-1-	
Telephone	Email	Zip Code	- sense of the sen
Treasurer's Name		and the second s	
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City		Zip Code	Property and the second
Telephone	Email	Zip Code	
Total business of the second s			
	nent has been examined by me anderstand that the intentional fai A misdemeanor."		
4~2 5 ~24 (Date)		(Signature of Candi	
(Date)		(Signature of Candi	date)
	SEE REVERSE SIDE FOR	INSTRUCTIONS	

Rev.2021

Governmental Ethics Commission