

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

This is an (Check one)

Initial Appointment

Amended Statement

**CANDIDATE**

(Please Type or Print)

Name <i>Abe Flam</i>		
Mailing Address <i>2323 E 19th Av</i>		
City <i>Winfield</i>	County <i>Cowley</i>	Zip Code <i>67156</i>
Telephone <i>620 218 2567</i>	Email <i>N/A</i>	
Office Sought <i>Trustee</i>	District No.	

**TREASURER**

Date Appointed		
Name <i>Abe Flam</i>		
Mailing Address		
City	Zip Code	
Telephone	Email	

**OR CANDIDATE COMMITTEE**

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

1-30-24

(Date)

*Abe Flam*

(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS