

**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	Aaron K Killingsworth		
Street	106 W HAWKES	KOCTEE	62038
City	DEALE	County	COULEE Zip Code 62070
Home Telephone	Business Telephone		
Office Sought	District No.		

**TREASURER**

Date Appointed			
Name	Self		
Address			
City			Zip Code
Home Telephone	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."

Date Appointed			
Chairperson's Name			
Address			
City			Zip Code
Home Telephone	Business Telephone		
Treasurer's Name			
Address			
City			Zip Code
Home Telephone	Business Telephone		

(Date) \_\_\_\_\_ (Signature of Candidate) \_\_\_\_\_

**SEE REVERSE SIDE FOR INSTRUCTIONS**