APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR LOCAL OFFICE

This is an (Check of CANDIDATE	, , , , , , , , , , , , , , , , , , , ,
Name David Falle	(Please Type or Print)
Street ///25 //4	1th Deive
City Winfield	County Cowley Zip Code 67156
Home Telephone	Business Telephone
Office Sought Sheaff	District No.
2:10/11:	
TŘEASURÉR	
Date Appointed	
Name Alicha S	icott
Address 6901 32212	Pd.
City Arkansos City	Zip Code 67005
Home Telephone	Business Telephone
OR CANDIDATE COMM	ПТТЕК
Date Appointed	
Chairperson's Name	
Address	
City	Zip Code
Home Telephone	Business Telephone
Treasurer's Name	
Address	
City	Zip Code
Home Telephone	Business Telephone
TO CHAIL A PRINCIPAL TO THE PARTY OF THE PAR	
SIGNATURE	
I declare that this statement ha	as been examined by me and to the best of my knowledge and belief is true
se document is a class A misd	and that the intentional failure to file this document or intentionally filing
12/12/2022	4/ a Atallast
$\frac{1 \times / 1 \times (0 \times 0)}{(\text{Date})}$	(Start Contract)
(Daie)	(Signatule of Candidate)
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Rev.2000

Governmental Ethics Commission