

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 Bart Littlejohn			
Mailing Address 321 Indiana St			
City Lawrence	County Douglas	Zip Code 66044	
Telephone 785 380 9413	Email		
Office Sought City Commissioner		District No.	

TREASURER

Date Appointed 03/06/2025			
Name Aaron Urban			
Mailing Address 631 N Daylily Dr.			
City Lawrence	Zip Code 66049		
Telephone 785 838 1882	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."

03/07/25
(Date)

Bart Littlejohn
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS