

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 | Sean Noble | | | | |
| Mailing Address | 3900 Willshire Drive | | | | |
| City | Lawrence | County | Douglas | Zip Code | 66049 |
| Telephone | 785-760-6056 | Email | salesnoble4663@gmail.com | | |
| Office Sought | City Commissioner - Lawrence | | | District No. | 497 |

TREASURER

| | | | |
|-----------------|--------------------------|----------|-------------------------|
| Date Appointed | 5/1/25 | | |
| Name | Sarah Yantzia | | |
| Mailing Address | 1600 Haskell Ave Apt 1S3 | | |
| City | Lawrence | Zip Code | 66044 |
| Telephone | 785-550-2181 | Email | Yantzia.sarah@gmail.com |

OR CANDIDATE COMMITTEE

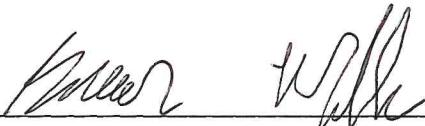
| | |
|--------------------|----------|
| Date Appointed | |
| Chairperson's Name | |
| Mailing Address | |
| City | Zip Code |
| Telephone | Email |
| Treasurer's Name | |
| Mailing Address | |
| City | Zip Code |
| Telephone | Email |

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.”

5/1/25

(Date)



(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS