

Print this form or Go Back



**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
901 S. Kansas Avenue
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is an (Check one) **Initial Appointment** **Amended Statement**

Candidate Candidate Name: **Jeffrey M Howards**

Address: **2100 S. 19th Terrace**

Address2:

City: **Leavenworth** Zip: **66048**

Home Phone: **(913) 651-2765** Business Phone: Cell Phone: **(913) 306-1389**

County: **Leavenworth** Email Address: **jhowards5957@gmail.com**

Office Sought: **State Board of Education** District No.: **1**

Treasurer Date Appointed: **05/20/2022**

Treasurer Name: **Jeffrey Howards**

Address: **2100 S 19th Ter**

Address2:

City: **Leavenworth** State: **KS** Zip: **66048**

Home Telephone: **(913) 651-2765** Business Phone: Cell Phone: **(913) 306-1389**

Email Address: **jhowards5957@gmail.com**

Candidate Date Appointed:

Committee Chairperson's Name:

Address:

Address2:

City: State: Zip:

Home Telephone: Business Phone: Cell Phone:

Email Address:

Date Appointed:

Treasurer's Name:

Address:

Address2:

City: State: Zip:

Home Telephone: Business Phone: Cell Phone:

Email Address:

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.

Executed on:

Date: **5/20/2022 4:55:59 PM** Signature of Candidate: **Jeffrey Howards**

Print this form or Go Back