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

Governmental Ethics Commission  
109 W. 9th, Suite 504  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
[www.kansas.gov/ethics](http://www.kansas.gov/ethics)

This is an (Check one) ☒ Initial Appointment ☐ Amended Statement

**Candidate**

Candidate Name: **Katelyn Delvaux**  
Address: **950 W. 46th St. N.**  
Address2:  
City: **Wichita** Zip: **67204**  
Home Phone: **(573) 673-2477** Business Phone: Cell Phone:  
County: **Sedgwick** Email Address: **kxdelvaux@wichita.edu**  
Office Sought: **State Representative** District No.: **91**

**Treasurer**

Date Appointed: **06/21/2012**  
Treasurer Name: **Katelyn Delvaux**  
Address: **950 W. 46th St. N.**  
Address2:  
City: **Wichita** State: **KS** Zip: **67204**  
Home Telephone: **(573) 673-2477** Business Phone: Cell Phone:  
Email Address: **kxdelvaux@wichita.edu**

**Candidate  
Committee**

Date Appointed:  
Chairperson's Name:  
Address:  
Address2:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:  
Email Address:

Date Appointed:  
Treasurer's Name:  
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: **6/21/2012 5:00:50 PM** Signature of Candidate: **Katelyn Delvaux**

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