

[Print this form](#) or [Go Back](#)

**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

This is an (Check one) Initial Appointment Amended Statement

Candidate

Candidate Name: **Jane B Byrnes**
Address: **PO Box 75501**
Address2:
City: **Wichita** Zip: **67275**
Home Phone: **(316) 729-7012** Business Phone: Cell Phone:
County: **Sedgwick** Email Address: **aliceandress@yahoo.com**
Office Sought: **State Representative** District No.: **105**

Treasurer

Date Appointed: **02/26/2010**
Treasurer Name: **Alice Andress**
Address: **544 S. Erie**
Address2:
City: **Wichita** State: **KS** Zip: **67211**
Home Telephone: **(316) 682-3669** Business Phone: Cell Phone:
Email Address: **aliceandress@yahoo.com**

**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: **7/23/2010 11:22:15 AM** Signature of Candidate: **Jane Byrnes**[Print this form](#) or [Go Back](#)