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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

This is an (Check one) Initial Appointment Amended Statement

Candidate Candidate Name: **Mitch Holmes**
Address: **P.O. Box 12**
Address2:
City: **St John** Zip: **67576**
Home Phone: **(620) 234-5834** Business Phone: Cell Phone:
County: **Stafford** Email Address: **mimi.holmes@juno.com**
Office Sought: **State Representative** District No.: **114**

Treasurer Date Appointed: **10/12/2010**
Treasurer Name: **Kim Hullman**
Address: **P.O. Box 12**
Address2:
City: **St John** State: **KS** Zip: **67576**
Home Telephone: **(620) 549-3428** Business Phone: **(620) 549-3271** Cell Phone: **(620) 786-0682**
Email Address: **khullman@abbb.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: **10/12/2010 3:10:15 PM** Signature of Candidate: **Mitch Holmes**

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