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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: **Randy Powell**  
Address: **14481 W 122nd St**  
Address2:  
City: **Olathe** Zip: **66062**  
Home Phone: **(913) 558-7840** Business Phone: Cell Phone:  
County: **Johnson** Email Address: **charlie@csquaredsolutions.com**  
Office Sought: **State Representative** District No.: **30**

**Treasurer** Date Appointed: **07/01/2014**  
Treasurer Name: **Charlie Isaacson**  
Address: **14501 W 122nd St**  
Address2:  
City: **Olathe** State: **KS** Zip: **66062**  
Home Telephone: **(913) 558-7840** Business Phone: Cell Phone:  
Email Address: **charlie@csquaredsolutions.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: **7/27/2014 7:47:55 PM** Signature of Candidate: **Randy Powell**

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**APPOINTMENT OF  
TREASURER OR CANDIDATE COMMITTEE FORM  
FOR CANDIDATE FOR STATE OFFICE**

KRIS W. KOBACH  
SECRETARY OF STATE

JUN 02 2014

FILED

This is an (Check one)



Initial Appointment



Amended Statement

**CANDIDATE**

(Please Type or Print)

Name **Randy Powell**

Street **14481 W. 122nd Street**

City **Olathe**

County **Johnson**

Zip Code **66062**

Home Telephone **913-461-6215**

Business Telephone **913-262-7034**

Office Sought **Kansas State Representative**

District No. **30**

**TREASURER**

Date Appointed **06/02/2014**

Name **Charlie Isaacson**

Address **14501 W. 122nd Street**

City **Olathe**

Zip Code **66062**

Home Telephone **913-558-7840**

Business Telephone **913-647-5180**

**OR CANDIDATE COMMITTEE**

Date Appointed

Chairperson's Name

Address

City

Zip Code

Home Telephone

Business Telephone

Treasurer's Name

Address

City

Zip Code

Home Telephone

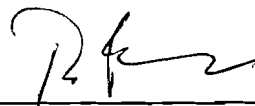
Business Telephone

**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."

06/02/2014

(Date)



(Signature of Candidate)

**SEE REVERSE SIDE FOR INSTRUCTIONS**