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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: **James Howell**  
Address: **125 E Buckthorn Rd**  
Address2:  
City: **Derby** Zip: **67037**  
Home Phone: **(316) 788-4887** Business Phone: Cell Phone:  
County: **Sedgwick** Email Address: **james.howell.67037@gmail.com**  
Office Sought: **State Representative** District No.: **82**

**Treasurer**

Date Appointed: **01/05/2011**  
Treasurer Name: **Preston Madding**  
Address: **749 Erin Lane**  
Address2:  
City: **Mulvane** State: **KS** Zip: **67110**  
Home Telephone: Business Phone: **(316) 777-1171** Cell Phone: **(316) 209-5523**  
Email Address: **p1madding@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: **1/5/2012 11:23:11 AM** Signature of Candidate: **James Howell**

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