

[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: **Carolyn L Bridges**
Address: **5219 E. First St. No.**
Address2:
City: **Wichita** Zip: **67208**
Home Phone: Business Phone: Cell Phone: **(316) 204-2509**
County: **Sedgwick** Email Address: **cbqatar@yahoo.com**
Office Sought: **State Representative** District No.: **83**

Treasurer Date Appointed: **06/22/2012**
Treasurer Name: **Julie Buth**
Address: **631 N. Bluff**
Address2:
City: **Wichita** State: **KS** Zip: **67208**
Home Telephone: **(316) 683-0574** Business Phone: Cell Phone: **(316) 655-5902**
Email Address: **plaza_girl@msn.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: **6/24/2012 9:46:34 PM** Signature of Candidate: **Carolyn L. Bridges**

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