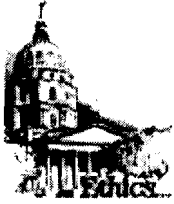


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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

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: **John E Thomas**

Address: **809 4th Ave**

Address2:

City: **Dodge City** Zip: **67801**

Home Phone: **(620) 227-7274** Business Phone: **(620) 227-7274** Cell Phone:

County: **Ford** Email Address: **jthomas1040@yahoo.com**

Office Sought: **State Representative** District No.: **119**

Treasurer Date Appointed: **06/02/2014**

Treasurer Name: **Niki Thomas**

Address: **P O Box 262**

Address2:

City: **Spearville** State: **KS** Zip: **67876**

Home Telephone: Business Phone: Cell Phone: **(620) 255-3704**

Email Address: **jujyy_girl@yahoo.com**

Candidate Date Appointed:

Committee 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: **7/28/2014 9:12:40 AM** Signature of Candidate: **John Thomas**

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

This is an (Check one)



Initial Appointment



Amended Statement

CANDIDATE

(Please Type or Print)

Name	John E. Thomas		
Street	809 4th Ave.		
City	Madison City	County	Ford
		Zip Code	67801
Home Telephone	Business Telephone		
Office Sought	State Representative		District No. 119

TREASURER

Date Appointed	6-2-2014		
Name	Niki Thomas		
Address	411 Oak St. PO Box 262		
City	Spearville	Zip Code	67876
Home Telephone	620 385 2971		Business Telephone

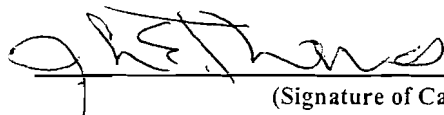
OR CANDIDATE COMMITTEE

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."

6-2-2014
(Date)


(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS