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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: **Trevor Jacobs**  
Address: **1927 Locust Rd**  
Address2:  
City: **Fort Scott** Zip: **66701**  
Home Phone: **(620) 224-6928** Business Phone: Cell Phone:  
County: **Bourbon** Email Address: **76tjacobs@gmail.com**  
Office Sought: **State Representative** District No.: **4**

**Treasurer** Date Appointed: **05/25/2016**  
Treasurer Name: **April Jacobs**  
Address: **1927 Locust Rd**  
Address2:  
City: **Fort Scott** State: **KS** Zip: **66701**  
Home Telephone: **(620) 224-7134** Business Phone: Cell Phone:  
Email Address: **splash711@hotmail.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:  
Address:  
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: **5/25/2016 3:30:44 PM** Signature of Candidate: **Trevor Jacobs**

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