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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: **Kevin D Jones**
Address: **416 E 7th**
Address2:
City: **Wellsville** Zip: **66092**
Home Phone: Business Phone: Cell Phone: **(316) 259-9505**
County: **Franklin** Email Address: **kevinjonesforkansas@gmail.com**
Office Sought: **State Representative** District No.: **5**

Treasurer

Date Appointed: **06/19/2012**
Treasurer Name: **Nicole Jones**
Address: **416 E. 7th**
Address2:
City: **Wellsville** State: **KS** Zip: **66092**
Home Telephone: Business Phone: Cell Phone: **(316) 708-3737**
Email Address: **kevinjonesforkansas@gmail.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: **7/29/2012 11:01:39 PM** Signature of Candidate: **Nicole Jones**[Print this form](#) or [Go Back](#)