

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

RECEIVED
FEB 24 2016

This is an (Check one)

Initial Appointment

Amended Statement

CANDIDATE

(Please Type or Print)

| | |
|--|---|
| Name <i>Ronald B. Ellis</i> | |
| Street <i>9199 K-4 Hwy</i> | |
| City <i>Meriden KS</i> | County <i>Jefferson</i> Zip Code <i>66512</i> |
| Home Telephone <i>785-484-3380</i> | Business Telephone <i>785-215-2780</i> |
| Office Sought <i>Dist 47th KS House of Representatives</i> District No. <i>47</i> | |

TREASURER

| | |
|---|-----------------------------|
| Date Appointed <i>February 10, 2016</i> | |
| Name <i>Pamela S. Jones</i> | |
| Address <i>110 Vista View Ct.</i> | |
| City <i>Ozawie, Ks.</i> | Zip Code <i>66070</i> |
| Home Telephone <i>785-876-3061</i> | Business Telephone <i>—</i> |

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."

2-24-2016
(Date)

Ronald B. Ellis
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS