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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: **Roger Elliott**
Address: **12015 E Tamarac**
Address2:
City: **Wichita** Zip: **67206**
Home Phone: Business Phone: Cell Phone: **(316) 655-2616**
County: **Sedgwick** Email Address: **roger@elliottforkansas.com**
Office Sought: **State Representative** District No.: **87**

Treasurer Date Appointed: **04/28/2016**
Treasurer Name: **Jon M Callen**
Address: **640 N Rock Road #24**
Address2:
City: **Wichita** State: **KS** Zip: **67206**
Home Telephone: **(316) 634-0624** Business Phone: **(316) 265-5241** Cell Phone: **(316) 734-0454**
Email Address: **jon@elliottforkansas.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: **8/2/2016 10:53:44 AM** Signature of Candidate: **Roger Elliott**

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Treasurer Date Appointed: **04/28/2016**
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Email Address: **jon@elliottforkansas.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: **7/18/2016 11:21:52 AM** Signature of Candidate: **Roger Elliott**

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

RECEIVED
APR 28 2016
KRIS W. KOBACH
SECRETARY
RECEIVED

This is an (Check one) Initial Appointment Amended Statement
(Please Type or Print)

CANDIDATE

Name	Roger A. Elliott		
Street	12015 E Tamarac		
City	Wichita	County	Sedgwick
Zip Code	67206		
Home Telephone	316-655-2616	Business Telephone	
Office Sought	State Representative		District No. 87

MAY 2 2016
KS Governmental Ethics Commission

TREASURER

Date Appointed	4-27-16		
Name	Jon M. Callen		
Address	640 N. Rock Rd. #24		
City	Wichita	Zip Code	67206
Home Telephone	316-634-0624	Business Telephone	316-265-5241

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."

4-27-16
(Date)

Roger A. Elliott
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS