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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: **Jon L Prescott**
Address: **110 W. 11th**
Address2:
City: **Ellinwood** Zip: **67526**
Home Phone: **(620) 793-0311** Business Phone: Cell Phone: **(620) 793-0311**
County: **Barton** Email Address: **jon.prescott@outlook.com**
Office Sought: **State Representative** District No.: **113**

Treasurer Date Appointed: **06/01/2016**
Treasurer Name: **Alicia Straub**
Address: **401 S Kennedy**
Address2:
City: **Ellinwood** State: **KS** Zip: **67526**
Home Telephone: **(620) 564-2196** Business Phone: Cell Phone: **(620) 282-3867**
Email Address: **commissionerstraub@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:
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: **6/1/2016 8:52:49 PM** Signature of Candidate: **Jon L. Prescott**

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