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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: **John P Wheeler Jr**  
Address: **902 N Anderson**  
Address2:  
City: **Garden City** Zip: **67846**  
Home Phone: **(620) 276-8805** Business Phone: Cell Phone: **(620) 272-7081**  
County: **Finney** Email Address: **john.wheeler1@cox.net**  
Office Sought: **State Representative** District No.: **123**

**Treasurer** Date Appointed: **08/12/2015**  
Treasurer Name: **Tom Walker**  
Address: **2113 Center Street #2**  
Address2:  
City: **Garden City** State: **KS** Zip: **67846**  
Home Telephone: **(620) 276-6744** Business Phone: Cell Phone: **(620) 271-1041**  
Email Address: **tmwalker1@sbcglobal.net**

**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: **8/17/2015 1:14:43 PM** Signature of Candidate: **John P. Wheeler Jr**

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