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**Campaign Finance  
Appointment of Treasurer or  
Candidate Committee Form  
For Candidate For State Office**

Governmental Ethics Commission  
901 S. Kansas Avenue  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
ethics.kansas.gov

This is an (Check one)     Initial Appointment     Amended Statement

**Candidate** Candidate Name: **Danette Harris**  
Address: **204 W. Rockwood Blvd**  
Address2:  
City: **Mulvane** Zip: **67110**  
Home Phone:    Business Phone:    Cell Phone: **(702) 727-7021**  
County: **Sedgwick** Email Address: **danette.harris@yahoo.com**  
Office Sought: **State Representative** District No.: **82**

**Treasurer** Date Appointed: **06/01/2014**  
Treasurer Name: **Patricia McCurdy**  
Address: **1494 N. Powers Dr**  
Address2:  
City: **Mulvane** State: **KS** Zip: **67110**  
Home Telephone: **(316) 777-1857** Business Phone:    Cell Phone: **(316) 737-2154**  
Email Address: **p\_mccurdy@sbcglobal.net**

**Candidate** Date Appointed:  
**Committee** 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: **1/11/2018 4:10:05 AM** Signature of Candidate: **Danette Harris**

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Address: **1494 N Powers Dr**  
Address2:  
City: **Mulvane** Zip: **67110**  
Home Phone: Business Phone: Cell Phone: **(702) 727-7021**  
County: **Sumner** Email Address: **danette.harris@yahoo.com**  
Office Sought: **State Representative** District No.: **82**

**Treasurer** Date Appointed: **06/01/2014**  
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Email Address: **p\_mccurdy@sbcglobal.net**

**Candidate** Date Appointed:  
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Address:  
Address2:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:  
Email Address:

Date Appointed:  
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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: **1/11/2016 12:49:09 PM** Signature of Candidate: **Danette Harris**

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