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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: **Jo Ella Hoye**
Address: **8517 Alden Lane**
Address2:
City: **Lenexa** Zip: **66215**
Home Phone: **(816) 248-2601** Business Phone: Cell Phone: **(816) 248-2601**
County: **Johnson** Email Address: **joellaforkansas@gmail.com**
Office Sought: **State Representative** District No.: **17**

Treasurer Date Appointed: **05/01/2019**
Treasurer Name: **Megan Langford**
Address: **7816 Park Street**
Address2:
City: **Lenexa** State: **KS** Zip: **66216**
Home Telephone: **(913) 209-2508** Business Phone: Cell Phone: **(913) 209-2508**
Email Address: **langford.megan@gmail.com**

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: **5/1/2019 10:02:56 AM** Signature of Candidate: **Jo Ella Hoye**

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