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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: **Leo Delperdang**
Address **2103 N Pintail**
Address2:
City: **Wichita** Zip: **67235**
Home Phone: **(316) 722-8917** Business Phone: **(316) 258-8917** Cell Phone: **(316) 258-8917**
County: **Sedgwick** Email Address: **delperda@swbell.net**
Office Sought: **State Representative** District No.: **94**

Treasurer Date Appointed: **06/01/2016**
Treasurer Name: **Leo Delperdang**
Address: **2103 N. Pintail St.**
Address2:
City: **Wichita** State: **KS** Zip: **67235**
Home Telephone: **(316) 722-8917** Business Phone: **(316) 258-8917** Cell Phone: **(316) 258-8917**
Email Address: **delperda@swbell.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: **6/30/2016 9:05:48 PM** Signature of Candidate: **Leo Delperdang**

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