

**APPOINTMENT OF  
TREASURER OR CANDIDATE COMMITTEE FORM  
FOR CANDIDATE FOR STATE OFFICE**

**RECEIVED**

JUN 04 2018

KS Governmental Ethics Commission

This is an (Check one)  **Initial Appointment**  **Amended Statement**

**CANDIDATE** (Please Type or Print)

<b>Name</b> Ron Howard		
<b>Street</b> 2719 E. Timberlane St.		
<b>City</b> Wichita	<b>County</b> Sedgwick	<b>Zip Code</b> 67216
<b>Home Telephone</b> 316-681-2645	<b>Business Telephone</b> 316-640-3425	
<b>Office Sought</b> State Representative	<b>District No.</b> 98	

**TREASURER**

<b>Date Appointed</b> May 31, 2018		
<b>Name</b> Terri Howard		
<b>Address</b> 2719 E. Timberlane St.		
<b>City</b> Wichita	<b>Zip Code</b> 67216	
<b>Home Telephone</b> 316-681-2645	<b>Business Telephone</b> 316-640-7103	

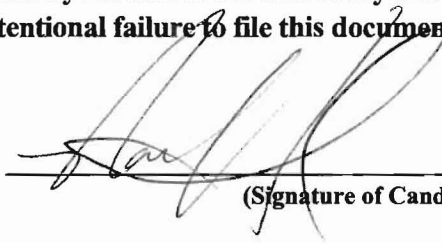
**OR CANDIDATE COMMITTEE**

<b>Date Appointed</b>		
<b>Chairperson's Name</b>		
<b>Address</b>		
<b>City</b>	<b>Zip Code</b>	
<b>Home Telephone</b>	<b>Business Telephone</b>	
<b>Treasurer's Name</b>		
<b>Address</b>		
<b>City</b>	<b>Zip Code</b>	
<b>Home Telephone</b>	<b>Business Telephone</b>	

**SIGNATURE**

"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."

5/31/18  
\_\_\_\_\_  
(Date)

  
\_\_\_\_\_  
(Signature of Candidate)

**SEE REVERSE SIDE FOR INSTRUCTIONS**