## APPOINTMENT OF

## TREASURER OR CANDIDATE COMMITTEE FORMECEIVED

| FOR | CAN | IDIDA | TEF | OR ST | ATE ( | <b>FFICE</b> |
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|     |     |       |     |       |       |              |

JUN 2 2 2020

| This is an (Check one) Initial Appointment Amended Statement Vernmental Ethics Commis   |
|---|
| CANDIDATE (Please Type or Print)  |
| Name Susanue Haynes   |
| Street 1250 N. St. Francis  |
| City Wichite County Sodonick Zip Code 107214  |
| Home Telephone 316-210-1567  Business Telephone 316-210-1567  |
| Office Sought House District 103 District No. 103   |
|   |
| TREASURER   |
| Date Appointed (0.18/2020   |
| Name Hazel Stabler  |
| Address 1711 N. Market  |
| City Wichita Zip Code 67214   |
| Home Telephone 331-278-1280 Business Telephone Salve  |
|   |
| OR CANDIDATE COMMITTEE  |
| Date Appointed  |
| Chairperson's Name  |
| Address   |
| City Zip Code   |
| Home Telephone Business Telephone   |
| Treasurer's Name  |
| Address   |
| City Zip Code   |
| Home Telephone Business Telephone   |
| SIGNATURE I declare that this statement has been examined by me and to the best of my knowledge and belief is true, rrect and complete. I understand that the intentional failure to file this document or intentionally filing a lse document is a class A misdemeanor." |
| (Date)  Sugant Haynes (Signature of Candidate)  |

SEE REVERSE SIDE FOR INSTRUCTIONS

**Governmental Ethics Commission** 

Rev.2000