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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: **Debbie Paulbeck**  
Address: **14601 Grant St**  
Address2:  
City: **Overland Park** Zip: **66221**  
Home Phone:    Business Phone: **(913) 210-0969** Cell Phone:  
County: **Johnson** Email Address: **debbieforkansas@gmail.com**  
Office Sought: **State Representative** District No.: **48**

**Treasurer**  
Date Appointed: **05/23/2024**  
Treasurer Name: **Debbie Paulbeck**  
Address: **14601 Grant St**  
Address2:  
City: **Overland Park** State: **KS** Zip: **66221**  
Home Telephone:    Business Phone: **(913) 210-0969** Cell Phone:  
Email Address: **debbieforkansas@gmail.com**

**Candidate Committee**  
Date Appointed:  
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: **6/3/2024 4:12:35 PM** Signature of Candidate: **Debbie Paulbeck**