



**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: **javion A Napier**
Address: **335 E. Swensson St. Lindsborg, KS 67456 box 402**
Address2:
City: **Lindsborg** Zip: **67456**
Home Phone: **(316) 553-9094** Business Phone: **(620) 615-1511** Cell Phone:
County: Email Address: **napierjavion7@gmail.com**
Office Sought: **State Representative** District No.: **73**

Treasurer

Date Appointed: **03/29/2024**
Treasurer Name: **Javion Napier**
Address: **335 E. Swensson St. Lindsborg, KS 67456 box 402**
Address2:
City: **Lindsborg** State: **KS** Zip: **67456**
Home Telephone: **(316) 553-9094** Business Phone: **(620) 615-1511** Cell Phone: **(620) 615-1511**
Email Address: **napierjavion7@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: **3/29/2024 2:57:03 PM** Signature of Candidate: **Javion Napier**