	APPOINTMENT OF
TREASUR	ER OR CANDIDATE COMMITTEE FORRECEIVED
	State
FOR	<b>CANDIDATE FOR LOCAL OFFICE</b> JAN <b>2</b> 2024
	KS Governmental Ethics Comm
This is an (Chec CANDIDATE	(Please Type or Print) Amended Statement
Name ASIYA/	NI ABERG
Mailing Address 538	N.FLORENCE #1212
City /1/1/ 417A	County SEDGWICK Zip Code 67212
Telephone 316 -869 - 4	196 Email jaclynnabegg@gmail.com
Office Sought STATE /	EPRESENTATIVE District No. 10.5
TREASURER	
Date Appointed 6/29	2123
Name DIANS F	RITTAN
Mailing Address 3826	W, 18th M.
City WILHITA	Zip Code 67203
Telephone 3/6 - 942 - 589,6	Email dybritton a hotmail. Com
OR CANDIDATE COM	MITTFE
OR CANDIDATE COM	MITTEE
Date Appointed	MITTEE
Date Appointed Chairperson's Name	
Date Appointed Chairperson's Name Mailing Address	Zip Code
Date Appointed Chairperson's Name Mailing Address City	
Date Appointed Chairperson's Name Mailing Address	Zip Code
Date Appointed Chairperson's Name Mailing Address City Telephone	Zip Code
Date Appointed Chairperson's Name Mailing Address City Telephone Treasurer's Name	Zip Code

12/28/23 (Date) (Signature of Candidate)

## SEE REVERSE SIDE FOR INSTRUCTIONS

**Governmental Ethics Commission** 

Print this form or Go Back



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: Jaelynn E Abegg Address: 538 N Florence St Apt 1212 Address2: City: Wichita Zip: 67276 Home Phone: Business Phone: Cell Phone: (316) 869-4196 County: Sedgwick Email Address: jaelynnabegg@gmail.com Office Sought: State Representative District No.: 105

Treasurer

Date Appointed: 06/29/2023 Treasurer Name: Diane Britton Address: 6812 Par Ln, #3 Address2: City: Wichita State: KS Zip: 67203 Home Telephone: Business Phone: Cell Phone: (316) 609-8784 Email Address: dvbritton@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: 8/29/2023 5:23:16 PM Signature of Candidate: Jaelynn Abegg