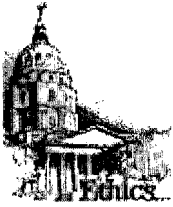


[Print this form](#) or [Go Back](#)



**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

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

Candidate

Candidate Name: **Bond Faulwell**
Address: **12344 Long**
City: **Overland Park** Zip: **66213-2209**
Home Phone: **9138518296** Business Phone: Cell Phone: **9134062190**
County: **Johnson** Email Address: **bfaulwell@kc.rr.com**
Office Sought: **State Senator** District No.: **37**

Treasurer

Date Appointed: **09/02/2008**
Treasurer Name: **Sam Skare**
Address: **2312 W 123 TER**
City: **Leawood** State: **KS** Zip: **66209**
Home Telephone: **9134695595** Business Phone: Cell Phone:
Email Address: **sammskare@kc.rr.com**

**Candidate
Committee**

Date Appointed:
Chairperson's Name:
Address:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
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: **9/4/2008 2:45:33 PM** Signature of Candidate: **Bond R. Faulwell**

[Print this form](#) or [Go Back](#)