

[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: **Brenda Landwehr**
Address: **2837 N Edwards St**
Address2:
City: **Wichita** Zip: **67204-4646**
Home Phone: **(316) 821-9800** Business Phone: **(316) 945-2011** Cell Phone:
County: **Sedgwick** Email Address: **brendalandwehr91@gmail.com**
Office Sought: **State Senator** District No.: **25**

Treasurer

Date Appointed: **10/25/2011**
Treasurer Name: **Willa DeCastro**
Address: **4127 N Plum Tree St**
Address2:
City: **Wichita** State: **KS** Zip: **67226**
Home Telephone: **(316) 522-1272** Business Phone: Cell Phone:
Email Address: **brendalandwehr91@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:
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: **11/2/2011 9:56:41 AM** Signature of Candidate: **Brenda K Landwehr**[Print this form](#) or [Go Back](#)

**APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM
FOR CANDIDATE FOR STATE OFFICE**

FILED
OCT 26 2011
KRIS W. KOBACH
SECRETARY OF STATE

This is an (Check one) Initial Appointment Amended Statement

CANDIDATE (Please Type or Print)

Name	BRENDA K. LANDWIEHR		
Street	2837 N. EDWARDS ST		
City	County	Zip Code	WICHITA SC 67204-4646
Home Telephone	Business Telephone	316-821-9800 316-945-2011	
Office Sought	District No.		SENATE 25

TREASURER

Date Appointed	10-26-11		
Name	WILLA DECASTRO		
Address	4127 N. PLUM TREE ST		
City	Zip Code	WICHITA 67226	
Home Telephone	Business Telephone	316-522-1272 N/A	

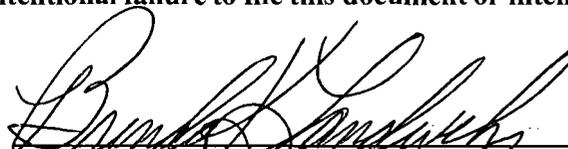
OR CANDIDATE COMMITTEE

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, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

10-26-11
(Date)


(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS