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: David Haley

Address: PO BOX 171110

Address2:

City: Kansas City Zip: 66101 7

Home Phone: (913) 321-3210 Business Phone: Cell Phone: County: Wyandotte Email Address: haleyforkansas@aol.com

Office Sought: State Senator District No.: 4

Treasurer Date Appointed: 11/01/2016

Treasurer Name: P J Padgett Address: PO BOX 171110

Address2:

City: Kansas city State: KS Zip: 66117

Home Telephone: (913) 321-3210 Business Phone: Cell Phone:

Email Address: haleyforkansas@aol.com

Candidate Date Appointed:

Committee 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:

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: 11/1/2016 3:18:04 PM Signature of Candidate: David Haley

Print this form or Go Back

APPOINTMENT OF

RECEIVED

TREASURER OR CANDIDATE COMMITTEE FORM

IUM 05 ZVIZ

Rev.2000

FOR CANDIDATE FOR STATE OFFICE

This is an (Check one) Initial Appointment Amended Statement
CANDIDATE (Please Type or Print)
Name DAVID HALEY
Street 936 Cleveland Ave.
City Kansas City. County Wyandotte Zip Code 66/01
Home Telephone 913/321.3210 Business Telephone 913/579.1490
Office Sought State Senate District No. Four
TREASURER
Date Appointed JUNE 01, 2012
Name Marolyn Kelley
Address 643 Troup Ave.
City Kansas City Zip Code 6610/
Home Telephone 913 / 568 · 7160 Business Telephone 913 / 568 · 7160
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
IGNATURE declare that this statement has been examined by me and to the best of my knowledge and belief is true rect and complete. I understand that the intentional failure to file this document or intentionally filing
Tune 01, 3013 (Date) (Date) (Signature of Candidate)
SEE REVERSE SIDE FOR INSTRUCTIONS

Governmental Ethics Commission