

[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: **Eden M Fuson**
Address: **304 N. Anita**
Address2:
City: **Potwin** Zip: **67123**
Home Phone: **(316) 281-5581** Business Phone: Cell Phone: **(316) 281-5581**
County: **Butler** Email Address: **edenfuson@yahoo.com**
Office Sought: **State Senator** District No.: **14**

Treasurer

Date Appointed: **06/22/2012**
Treasurer Name: **Karen Kolavalli**
Address: **411 S. Denver**
Address2:
City: **El Dorado** State: **KS** Zip: **67042**
Home Telephone: **(316) 323-3862** Business Phone: Cell Phone:
Email Address: **heytooto@cox.net**

**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: **7/30/2012 2:05:48 PM** Signature of Candidate: **Eden Fuson**

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