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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: Susan G Fowler

Address: 1557 Road N

Address2:

City: Emporia Zip: 66801

Home Phone: Business Phone: (620) 342-4535 Cell Phone: (620) 366-1316

County: Lyon Email Address: sgfowler@kansansfirst.org

Office Sought: State Senator District No.: 17

Treasurer Date Appointed: 02/22/2016

Treasurer Name: Elijah O Williams

Address: 201 E 7th Apt 1

Address2:

City: Emporia State: KS Zip: 66801

Home Telephone: Business Phone: Cell Phone: (620) 803-9423

Email Address: eliwilliams95.work@gmail.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:

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: 7/22/2016 8:39:47 AM Signature of Candidate: Susan G Fowler

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APPOINTMENT OF

RECEIVED

TREASURER OR CANDIDATE COMMITTEE FORM

FOR CANDIDATE FOR STATE OFFICE GOVERNMENT

This is an (Check one	e) Initial Appointment Amended Statement
CANDIDATE	(Please Type or Print)
Name Susan G Fowler	
Street 1557 Road N	
City Emporia	County Lyon Zip Code 66801
Home Telephone 620-343-1072	Business Telephone 620-342-4535
Office Sought State Senate	District No. 17
TREASURER	
Date Appointed 2-9-16	
Name Elijah Williams	
Address 201 E 7th Apt 8	
City Emporia	Zip Code 66801
Home Telephone (620) 803-9423	Business Telephone n/a
OR CANDIDATE COMMI Date Appointed Chairman and Name	
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, or rect and complete. I understand that the intentional failure to file this document or intentionally filing a alse document is a class A misdemeanor."	
2-9-16	(Xixiash L-kari Cer)
(Date)	(Signature of Candidate)
SEE REVERSE SIDE FOR INSTRUCTIONS	
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