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

Governmental Ethics Commission  
901 S. Kansas Avenue  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
ethics.kansas.gov

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

**Candidate** Candidate Name: **Carl Brewer**  
Address: **4324 E Norwood Ln**  
Address2:  
City: **Wichita** Zip: **67220**  
Home Phone: **(316) 686-4134** Business Phone: Cell Phone: **(316) 519-6805**  
County: Email Address: **cgbrewer@cox.net**  
Office Sought: **Governor** District No.:

**Treasurer** Date Appointed: **02/19/2017**  
Treasurer Name: **Ron Holt**  
Address: **2718 N Terrace Dr**  
Address2:  
City: **Wichita** State: **KS** Zip: **67220**  
Home Telephone: **(316) 685-5427** Business Phone: Cell Phone: **(316) 519-5427**  
Email Address: **ronaldrejoice@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:

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: **2/19/2017 7:01:41 PM** Signature of Candidate: **Carl Brewer**

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