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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: **Nathaniel McLaughlin**  
Address: **2731 N. 72nd Terrace**  
Address2:  
City: **Kansas City** Zip: **66109**  
Home Phone: Business Phone: Cell Phone: **(913) 953-2768**  
County: Email Address: **nathanielmclaughlin@yahoo.com**  
Office Sought: **Insurance Commissioner** District No.:

**Treasurer** Date Appointed: **05/24/2018**  
Treasurer Name: **Joan Wagnon**  
Address: **P.O. Box 8303**  
Address2:  
City: **Topeka** State: **KS** Zip: **66608**  
Home Telephone: **(785) 286-3254** Business Phone: Cell Phone: **(785) 249-3464**  
Email Address: **Joan101740@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:  
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: **5/24/2018 10:20:06 AM** Signature of Candidate: **Nathaniel McLaughlin**

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