

**APPOINTMENT OF  
TREASURER OR CANDIDATE COMMITTEE FORM  
FOR CANDIDATE FOR LOCAL OFFICE**

This is an (Check one)



Initial Appointment



Amended Statement

**CANDIDATE**

(Please Type or Print)

Name <u>John Landon</u>		
Mailing Address <u>1057 N. 900 Road</u>		
City <u>Lawrence</u>	County <u>Douglas</u>	Zip Code <u>66047</u>
Telephone <u>785-423-3348</u>		Email <u>jlandon2020@yahoo.com</u>
Office Sought <u>Commissioner</u>		District No. <u>3</u>

**TREASURER**

Date Appointed <u>4-15-2024</u>		
Name <u>Amy Landon</u>		
Mailing Address <u>1057 N. 900 Rd</u>		
City <u>Lawrence</u>	Zip Code <u>66047</u>	
Telephone <u>785-423-3348</u>		Email <u>jlandon2020@yahoo.com</u>

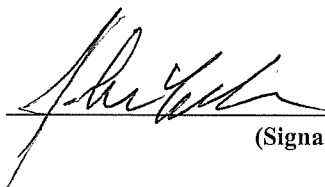
**OR CANDIDATE COMMITTEE**

Date Appointed		
Chairperson's Name		
Mailing Address		
City	Zip Code	
Telephone	Email	
Treasurer's Name		
Mailing Address		
City	Zip Code	
Telephone	Email	

**SIGNATURE**

"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."

4/15/24  
(Date)

  
(Signature of Candidate)

**SEE REVERSE SIDE FOR INSTRUCTIONS**