

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

This is an (Check one)  Initial Appointment  Amended Statement  
(Please Type or Print)

**CANDIDATE**

Name	Jalaine Richardson		
Street	909 Mansfield		
City	Winfield	County	Cowley Zip Code 67156
Home Telephone	620-218-4481	Business Telephone	
Office Sought	Board of Education	District No.	465

**TREASURER**

Date Appointed	
Name	self
Address	
City	Zip Code
Home Telephone	Business Telephone

**OR CANDIDATE COMMITTEE**

Date Appointed	
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, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

5-1-25  
(Date)

Jalaine Richardson  
(Signature of Candidate)

**SEE REVERSE SIDE FOR INSTRUCTIONS**