

**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 <u>David T. Jackson II</u>			
Mailing Address <u>806 S West Rd</u>			
City <u>Newton</u>	County <u>Harvey</u>	Zip Code <u>67114</u>	
Telephone <u>316-212-1371</u>	Email <u>David.T.Jackson27@protonmail.com</u>		
Office Sought <u>Newton School Board</u>	District No. _____		

TREASURER

Date Appointed <u>2 June 2025</u>	
Name <u>Jeremy Holstead</u>	
Mailing Address <u>1020 Fairview Farview</u>	
City <u>Newton</u>	Zip Code <u>67114</u>
Telephone <u>937-533-9207</u>	Email _____

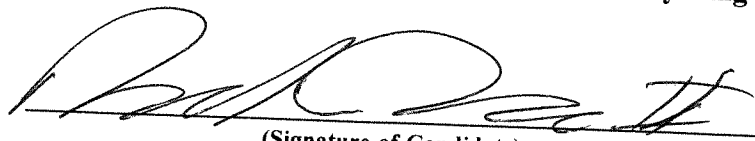
OR CANDIDATE COMMITTEE

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.”

2 JUN 25
(Date)


(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS