APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR LOCAL OFFICE

| This is an (Check one) | Initial A | Appointment | Amended Statement |
|--|------------|--------------------|---|
| CANDIDATE | (Please Ty | pe or Print) | |
| Name Donna M Ginty | | | |
| Street 1733 NW Taylor | | | |
| City Topeka | County | 8N | Zip Code 66608 |
| ome Telephone 785-221-2767 Business Telephone | | | |
| Office Sought Seamon USD 345 | Position | 4A | District No. 345 |
| | | | |
| TREASURER | | | |
| Date Appointed 4/16/25 | | | |
| Name Patricia A. Har | | | |
| Address 4029 SW 33rd Terr | ace | | |
| City Topeka | | | Zip Code 66614 |
| | | | |
| OR CANDIDATE COMMITTED Date Appointed Chairperson's Name | E | | |
| Address | | | |
| City | | | Zip Code |
| Home Telephone | | | |
| Treasurer's Name | | Business Telephol | |
| Address | | | |
| City | | | Zip Code |
| Home Telephone | | Business Telephone | |
| receptions | | Zasmess reiepiloi | |
| SIGNATURE "I declare that this statement has been examined by me and to the best of my knowledge and belief is true or | | | |
| 4/16/25 (Date) | | Donna (| Signature of Candidate) APR 16 2025 AM10:23 |

SEE REVERSE SIDE FOR INSTRUCTIONS

Governmental Ethics Commission

Rev.2000

INSTRUCTIONS

This form must be completed by each candidate for local office and filed with your County Election Officer. A candidate must

appoint a treasurer, or in lieu thereof a candidate committee, not later than ten (10) days after becoming a candidate. This form

must be filed not later than ten (10) days following such appointment. Also, a new form must be filed whenever there is a change

in treasurers or other information previously reported.

For further information contact:

Kansas Governmental Ethics Commission

901 S. Kansas Avenue

Topeka, Kansas 66612

Office 785-296-4219

Fax 785-296-2548