



**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: **Betty J Arnold**  
Address: **5311 E Pembroke St**  
Address2:  
City: **Wichita** Zip: **67220**  
Home Phone: **(316) 684-7792** Business Phone: **(316) 259-1610** Cell Phone: **(316) 259-1610**  
County: **Sedgwick** Email Address: **bettyarnold60@hotmail.com**  
Office Sought: **State Board of Education** District No.: **8**

**Treasurer**

Date Appointed:  
Treasurer Name:  
Address:  
Address2:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:  
Email Address:

**Candidate Committee**

Date Appointed: **01/02/2024**  
Chairperson's Name: **Betty Arnold**  
Address: **5311 E Pembroke St**  
Address2:  
City: **Wichita** State: **KS** Zip: **67220**  
Home Telephone: Business Phone: Cell Phone: **(316) 259-1610**  
Email Address: **bettyarnold60@hotmail.com**

Date Appointed: **07/22/2024**  
Treasurer's Name: **Christopher Baldon**  
Address: **4835 E Willow Point Ct**  
Address2:  
City: **Bel Aire** State: **KS** Zip: **67220**  
Home Telephone: Business Phone: Cell Phone: **(316) 516-8537**

Email Address: **chriscaldon@gmail.com**

**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: **7/29/2024 10:27:08 AM** Signature of Candidate: **Betty Arnold**



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**Candidate**

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County: **Sedgwick** Email Address: **bettyarnold60@hotmail.com**  
Office Sought: **State Board of Education** District No.: **8**

**Treasurer**

Date Appointed: **12/19/2023**  
Treasurer Name: **Tamara Huff-Johnson**  
Address: **13210 Castlewood**  
Address2:  
City: **Wichita** State: **KS** Zip: **67240**  
Home Telephone: Business Phone: Cell Phone: **(316) 258-4344**  
Email Address: **Hufftamara@yahoo.com**

**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: **12/19/2023 8:18:43 AM** Signature of Candidate: **Betty Arnold**