## APPOINTMENT OF

## TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR LOCAL OFFICE

This is an (Check one) CANDIDATE	
Name Jana MC	(Please Type or Print)
Mailing Address	ade Pol
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TREASURER	
Date Appointed	
Name Lana M	apada - att
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OR CANDIDATE COMMIT	
Date Appointed	
Chairperson's Name	
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Mailing Address  City Telephone Treasurer's Name Mailing Address City Telephone  SIGNATURE "I declare that this statement has	Email  Zip Code  Email  been examined by me and to the best of my knowledge and belief is true, that the intentional failure to file this document or intentionally filing a

Rev.2021

Governmental Ethics Commission

## INSTRUCTIONS

This form must be completed by each candidate for state office and filed with the Secretary of State (Memorial Hall - 1<sup>st</sup> floor, 120 SW 10<sup>th</sup>, Topeka, KS 66612-1594). 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:

Governmental Ethics Commission 901 S. Kansas Avenue Topeka, Kansas 66612 Ofc 785-296-4219 Fax 785-296-2548