

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

This is an (Check one)



Initial Appointment



Amended Statement

CANDIDATE

(Please Type or Print)

Name <u>Brenden Jensen</u>		
Street <u>826 1/2 S Kansas Ave</u>		
City <u>Topeka</u>	County <u>Shawnee</u>	Zip Code <u>66612</u>
Home Telephone <u>785-380-5123</u>	Business Telephone	
Office Sought <u>City Council</u>	District No. <u>1</u>	

TREASURER

Date Appointed <u>5/29/25</u>	
Name <u>Karen Fowler</u>	
Address <u>320 SW 33rd ST</u>	
City <u>Topeka, KS</u>	Zip Code <u>66611</u>
Home Telephone	Business Telephone <u>785-267-7100</u>

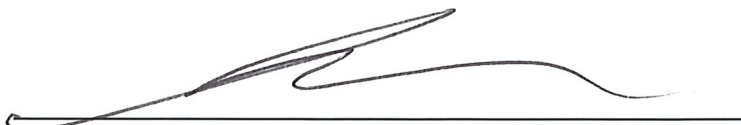
OR CANDIDATE COMMITTEE

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."

5/29/25
(Date)


(Signature of Candidate)

MAY 29 2025 AM 9:30

SEE REVERSE SIDE FOR INSTRUCTIONS