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**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: **Mark Dupree**
Address: **3201 N. 111th Street**
Address2:
City: **Kansas City** Zip: **66109**
Home Phone: **(913) 940-9406** Business Phone: **(913) 815-4077** Cell Phone:
County: **Wyandotte** Email Address: **mark.lawdupree@gmail.com**
Office Sought: **District Attorney** District No.: **29**

Treasurer
Date Appointed: **09/03/2024**
Treasurer Name: **Shanelle Dupree**
Address: **3201 N. 111th Street**
Address2:
City: **Kansas City** State: **KS** Zip: **66109**
Home Telephone: **(913) 940-9460** Business Phone: Cell Phone:
Email Address: **info@dupreeperspective.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: **9/3/2024 6:18:08 AM** Signature of Candidate: **Mark A. Dupree, Sr.**

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Address2:
City: **Kansas City** Zip: **66109**
Home Phone: **(913) 940-9406** Business Phone: **(913) 815-4077** Cell Phone:
County: **Wyandotte** Email Address: **mark@dupreeforda.com**
Office Sought: **District Attorney** District No.: **29**

Treasurer Date Appointed: **03/25/2019**
Treasurer Name: **Karema Luster**
Address: **9301 West 73rd Street Apt. 305**
Address2:
City: **Merriam** State: **KS** Zip: **66204**
Home Telephone: **(913) 231-2415** Business Phone: Cell Phone:
Email Address: **karema75@gmail.com**

Candidate Date Appointed:
Committee 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: **3/25/2019 10:18:20 PM** Signature of Candidate: **Mark A. Dupree, Sr.**

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