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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: **Michelle L Dombrosky**
Address: **14248 W 157th St**
Address2:
City: **Olahte** Zip: **66062**
Home Phone: **(913) 782-1835** Business Phone: Cell Phone:
County: **Johnson** Email Address: **michelleforschools03@gmail.com**
Office Sought: **State Board of Education** District No.: **3**

Treasurer Date Appointed: **05/22/2018**
Treasurer Name: **Sandy Hartman**
Address: **16751 W 157th St**
Address2:
City: **Olathe** State: **KS** Zip: **66062**
Home Telephone: **(913) 375-3740** Business Phone: Cell Phone:
Email Address: **sandyhartman1@comcast.net**

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: **10/9/2018 1:57:20 PM** Signature of Candidate: **Michelle Dombrosky**

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

RECEIVED
MAY 29 2018
KS Governmental Ethics Commission

This is an (Check one)

☒

Initial Appointment

☐

Amended Statement

CANDIDATE

(Please Type or Print)

| | | | |
|---|-----------------------|------------------------|--|
| Name <u>Michelle Dombrosky</u> | | | |
| Street <u>14248 W. 157th St</u> | | | |
| City <u>Olathe</u> | County <u>Johnson</u> | Zip Code <u>66062</u> | |
| Home Telephone <u>913-782-1835</u> | | Business Telephone | |
| Office Sought <u>State board of Education</u> | | District No. <u>#3</u> | |

TREASURER

| | |
|---|-----------------------|
| Date Appointed | |
| Name <u>Sandy Hartman Jones</u> | |
| Address <u>16751 W. 157th St</u> | |
| City <u>Olathe</u> | Zip Code <u>66062</u> |
| Home Telephone <u>913-375-3740</u> Business Telephone | |

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."

5/23/2018

(Date)

Michelle Dombrosky

(Signature of Candidate)

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