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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: **Lana L Kombacher**
Address: **320 SE Norwood**
Address2:
City: **Topeka** Zip: **66607**
Home Phone: **(804) 432-6333** Business Phone: Cell Phone:
County: **Shawnee** Email Address: **lkombacher@cox.com**
Office Sought: **State Board of Education** District No.: **1**

Treasurer
Date Appointed: **05/22/2023**
Treasurer Name: **Lana Kombacher**
Address: **320 SE Norwood**
Address2:
City: **Topeka** State: **KS** Zip: **66607**
Home Telephone: Business Phone: Cell Phone: **(804) 432-6333**
Email Address: **lkombacher@cox.net**

**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: **5/22/2023 4:54:31 AM** Signature of Candidate: **Lana Kombacher**