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Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office

Governmental Ethics Commission 109 W. 9th, Suite 504 Topeka, KS 66612 Phone (785) 296-4219 Fax (785) 296-2548 www.kansas.gov/ethics

Candidate

This is an (Check one) Y Initial Appointment Amended Statement

Candidate Name: Nancy Bauder

Address: 721 S 21 ST

City: Leavenworth Zip: 66048

Home Phone: 9136830646 Business Phone: 9136830646 Cell Phone: 9136830646

County: Leavenworth Email Address: baudernancy@gmail.com

Office Sought: State Representative District No.: 41

Treasurer

Date Appointed: 03/18/2010
Treasurer Name: Michael Crow
Address: 1200 S Broadway ST

City: Leavenworth State: KS Zip: 66048

Home Telephone: 9136821544 Business Phone: 9136830166 Cell Phone:

Email Address: MikeCrow@crowlegal.com

Candidate Committee Date Appointed:

Chairperson's Name:

Address:

City: State: Zip:

Home Telephone: Business Phone: Cell Phone:

Email Address:

Date Appointed: Treasurer's Name:

Address:

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: 5/18/2010 2:56:10 PM Signature of Candidate: Nancy D Bauder

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	R CANDIDATE COMMITTEE FORM
AR FOR CAN	IDIDATE FOR STATE OFFICE Initial Appointment Amended Statement
THORNDE STATE FOR CAN	DIDATE FOR STATE OFFICE
This is an (Check one)	Initial Appointment Amended Statement
CANDIDATE	(Please Type or Print)
Name Nancy Diane	
Street 721 5.215 S	
City Leavenworth	County Leavenwort-Zip Code 66048
Home Telephone 913.683.06	46 Business Telephone 913.683.0646
	Sentative District No. 41
1	
TREASURER	•
Date Appointed 3-18-10	
Name MICHAEL CROL	
Address 1200 S. BROAD	>WAY
City Leavenworth.	Zip Code 66048
Home Telephone 913-682-154	44 Business Telephone 913-682-0166
OR CANDIDATE COMMITTE	rr ·
Date Appointed	
Chairperson's Name	<u></u>
Address	
City	Zip Code
Home Telephone	Business Telephone
rrome reichnone	 _
Treasurer's Name	
`	<u> </u>
Treasurer's Name	Zip Code

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."

3-18.10 (Date)

Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

Governmental Ethics Commission

Rev.2000