## APPOINTMENT OF

## TREASURER OR CANDIDATE COMMITTEE FORM

FOR CANDIDATE FOR LOCAL OFFICE State Mainemmental ecros Oct misnion This is an (Check one) Initial Appointment Amended Statement **CANDIDATE** (Please Type or Print) Name Shirley Palmer Eggle Road Zip Code County Home Telephone **Business Telephone** Office Sought C District No. **TREASURER** Date Appointed 2012 une Name ( Address 1862 Egale Zip Code City Fort Scot Home Telephone **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."

June 11, 2012
(Date)

(\$ignature of Candidate)

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Governmental Ethics Commission

Rev.2000

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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

This is an (Check one) Initial Appointment Amended Statement

Candidate

Candidate Name: Shirley Palmer

Address: 1862 Eagle RD City: Fort Scott Zip: 66701

Home Phone: 620-223-4105 Business Phone: 620-223-4105 Cell Phone: 6207041934

County: Bourbon Email Address: rspalmer1862@sbcglobal.net

Office Sought: State Representative District No.: 4

Treasurer

Date Appointed: 02/01/2007

Treasurer Name: Ronald Palmer

Address: 1862 Eagle RD

City: Fort Scott State: KS Zip: 66701

Home Telephone: 6202234105 Business Phone: 6202234105 Cell Phone: 6207041938

Email Address: rsplmr@gmail.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: 7/4/2008 2:14:40 PM Signature of Candidate: Shirley J. Palmer

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