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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: **Mike Burgess**
Address: **6009 SW 23rd St**
Address2:
City: **Topeka** Zip: **66614**
Home Phone: **(785) 271-0707** Business Phone: Cell Phone:
County: **Shawnee** Email Address: **mike@mikeburgess.com**
Office Sought: **State Representative** District No.: **53**

Treasurer

Date Appointed: **06/09/2012**
Treasurer Name: **Megan Burgess**
Address: **6009 SW 23rd St**
Address2:
City: **Topeka** State: **KS** Zip: **66614**
Home Telephone: Business Phone: Cell Phone:
Email Address: **megan@meganburgess.org**

**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:
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: **6/23/2012 11:11:31 PM** Signature of Candidate: **Mike Burgess**

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