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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**

CandidateCandidate Name: **Jack Kopfman**Address: **302 East 2nd**

Address2:

City: **Caney** Zip: **67333**Home Phone: **(620) 879-5669** Business Phone: Cell Phone:County: **Montgomery** Email Address: **jack.kopfmanjr@rocketmail.com**Office Sought: **State Representative** District No.: **11****Treasurer**Date Appointed: **01/23/2012**Treasurer Name: **David Deal JR**Address: **P.O. Box 214**

Address2:

City: **Niotaze** State: **KS** Zip: **67355**Home Telephone: Business Phone: Cell Phone: **(620) 252-8496**Email Address: **daviddeal921@yahoo.com****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: **6/6/2012 1:12:28 PM** Signature of Candidate: **Jack Kopfman**[Print this form](#) or [Go Back](#)