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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: **Amber Versola**
Address: **8106 Monrovia St**
Address2:
City: **Lenexa** Zip: **66215**
Home Phone: Business Phone: Cell Phone: **(785) 979-1733**
County: **Johnson** Email Address: **aversola@gmail.com**
Office Sought: **State Representative** District No.: **23**

Treasurer Date Appointed: **04/29/2014**
Treasurer Name: **Marlys Shulda**
Address: **6340 Millridge St**
Address2:
City: **Shawnee** State: **KS** Zip: **66218**
Home Telephone: **(913) 422-4072** Business Phone: Cell Phone:
Email Address: **mshulda@gmail.com**

Candidate Date Appointed:
Committee 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:

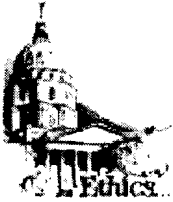
I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **10/27/2014 3:17:27 PM** Signature of Candidate: **Amber Versola**

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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: **4/29/2014 10:16:09 PM** Signature of Candidate: **Amber Versola**

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**APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM**
FOR CANDIDATE FOR STATE OFFICE

FILED

APR 15 2014

**KRIS W. KOBACH
SECRETARY OF STATE**

This is an (Check one)



Initial Appointment



Amended Statement

CANDIDATE

(Please Type or Print)

Name	Amber Versola		
Street	8106 Monrovia Street		
City	Lenexa	County	Johnson
Zip Code	66215		
Home Telephone	785-979-1733	Business Telephone	
Office Sought	State Representative		District No. 23rd

TREASURER

Date Appointed	4.15.14		
Name	Amber Versola		
Address	8106 Monrovia Street		
City	Lenexa	Zip Code	66215
Home Telephone	785 979 1733	Business Telephone	

OR CANDIDATE COMMITTEE

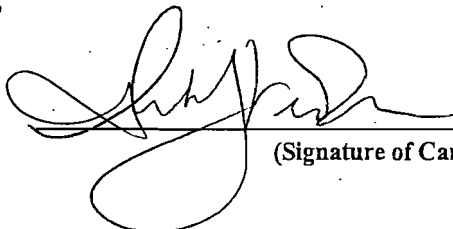
Date Appointed			
Chairperson's Name			
Address			
City		Zip Code	
Home Telephone		Business Telephone	
Treasurer's Name			
Address			
City		Zip Code	
Home Telephone		Business Telephone	

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."

4.15.14

(Date)



(Signature of Candidate)

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