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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: **Jana T Goodman**
Address: **410 Broadway ST**
Address2:
City: **Leavenworth** Zip: **66048**
Home Phone: **(913) 682-7413** Business Phone: **(913) 547-0565** Cell Phone: **(913) 547-0565**
County: **Leavenworth** Email Address: **janagood@kc.rr.com**
Office Sought: **State Representative** District No.: **41**

Treasurer

Date Appointed: **06/11/2008**
Treasurer Name: **Mark Grisham**
Address: **2100 Alder ST**
Address2:
City: **Leavenworth** State: **KS** Zip: **66048**
Home Telephone: Business Phone: Cell Phone: **(913) 499-9750**
Email Address: **mcgrisham@stjoewireless.net**

**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: **7/19/2012 7:39:48 PM** Signature of Candidate: **Mark A. Grisham**

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