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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: **Patrick M McMurray**
Address: **1500 W Main**
Address2: **Apt 111**
City: **Chanute** Zip: **66720**
Home Phone: Business Phone: Cell Phone: **(614) 940-3058**
County: **Neosho** Email Address: **cmptechie@yahoo.com**
Office Sought: **State Representative** District No.: **9**

Treasurer Date Appointed: **06/01/2016**
Treasurer Name: **Patrick M McMurray**
Address: **1500 W Main**
Address2: **Apt 111**
City: **Chanute** State: **KS** Zip: **66720**
Home Telephone: Business Phone: Cell Phone: **(614) 940-3058**
Email Address: **cmptechie@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:
Address:
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: **6/18/2016 11:51:28 AM** Signature of Candidate: **Patrick M McMurray**

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