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

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