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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
901 S. Kansas Avenue
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is an (Check one) **Initial Appointment** **Amended Statement**

Candidate Candidate Name: **Brian Clausen**
Address: **6720 W. 140th St. Apt. 3904**
Address2:
City: **Overland Park** Zip: **66223**
Home Phone: Business Phone: Cell Phone: **(913) 638-5555**
County: **Johnson** Email Address: **clausenforkansas@gmail.com**
Office Sought: **State Representative** District No.: **28**

Treasurer Date Appointed: **03/29/2018**
Treasurer Name: **Charles Lovell**
Address: **7710 Chadwick St.**
Address2:
City: **Prairie Village** State: **KS** Zip: **66208**
Home Telephone: Business Phone: Cell Phone:
Email Address: **clovell24@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:
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: **5/16/2018 10:21:15 AM** Signature of Candidate: **Brian Clausen**

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This is an (Check one) Initial Appointment Amended Statement

Candidate Candidate Name: **Brian Clausen**
Address: **P.O. Box 25021**
Address2:
City: **Overland Park** Zip: **66225**
Home Phone: Business Phone: Cell Phone: **(913) 638-5555**
County: **Johnson** Email Address: **clausenforkansas@gmail.com**
Office Sought: **State Representative** District No.: **28**

Treasurer Date Appointed: **03/29/2018**
Treasurer Name: **Charles Lovell**
Address: **7710 Chadwick St.**
Address2:
City: **Prairie Village** State: **KS** Zip: **66208**
Home Telephone: Business Phone: Cell Phone:
Email Address: **clovell24@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:
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: **3/29/2018 8:13:08 PM** Signature of Candidate: **Brian Clausen**

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This is an (Check one) **Initial Appointment** **Amended Statement**

Candidate Candidate Name: **Brian Clausen**
Address: **P.O. Box 25021**
Address2:
City: **Overland Park** Zip: **66225**
Home Phone: Business Phone: Cell Phone: **(913) 638-5555**
County: **Johnson** Email Address: **clausenforkansas@gmail.com**
Office Sought: **State Representative** District No.: **28**

Treasurer Date Appointed: **03/18/2018**
Treasurer Name: **Ashley Lovell**
Address: **7710 Chadwick St.**
Address2:
City: **Prairie Village** State: **KS** Zip: **66208**
Home Telephone: Business Phone: Cell Phone:
Email Address: **ashley.katz44@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:
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: **3/18/2018 1:16:44 PM** Signature of Candidate: **Brian Clausen**

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