

[Print this form](#) or [Go Back](#)



**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: **Martin Long**
Address: **2221 S. Road P**
Address2: **P.O. Box 1031**
City: **Ulysses** Zip: **67880**
Home Phone: **(620) 356-1964** Business Phone: Cell Phone:
County: **Grant** Email Address: **martlong@pld.com**
Office Sought: **State Representative** District No.: **124**

Treasurer Date Appointed: **05/14/2018**
Treasurer Name: **Debbie Long**
Address: **2221 S. Road P**
Address2: **P.O. Box 1031**
City: **Ulysses** State: **KS** Zip: **67880**
Home Telephone: **(620) 356-1964** Business Phone: Cell Phone:
Email Address: **deblong@pld.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: **5/19/2018 11:00:34 AM** Signature of Candidate: **Martin Long**

[Print this form](#) or [Go Back](#)