

**APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM
FOR CANDIDATE FOR STATE OFFICE**

RECEIVED
JUL 31 2019
KS Governmental Ethics Commission

This is an (Check one) Initial Appointment Amended Statement

CANDIDATE

(Please Type or Print)

| | | | |
|---|--|-----------------------|--|
| Name <u>MARK Pringhe</u> | | | |
| Street <u>370 Highway 75</u> | | | |
| City <u>Yates Center</u> | County <u>Woodson</u> | Zip Code <u>66783</u> | |
| Home Telephone <u>620-537-7581</u> | Business Telephone <u>620-212-8084</u> | | |
| Office Sought <u>State Representative</u> | District No. <u>13</u> | | |

TREASURER

| | | | |
|--|--|--|--|
| Date Appointed <u>7-26-19</u> | | | |
| Name <u>Jo Ann Feeler</u> | | | |
| Address <u>100 N. Green St. / Apt. 1</u> | | | |
| City <u>Yates Center, KS.</u> | Zip Code <u>66783</u> | | |
| Home Telephone <u>620-212-8990</u> | Business Telephone <u>620-212-8990</u> | | |

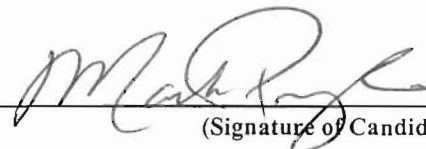
OR CANDIDATE COMMITTEE

| | | | |
|--------------------|--------------------|--|--|
| Date Appointed | | | |
| Chairperson's Name | | | |
| Address | | | |
| City | Zip Code | | |
| Home Telephone | Business Telephone | | |
| Treasurer's Name | | | |
| Address | | | |
| City | Zip Code | | |
| Home Telephone | Business Telephone | | |

SIGNATURE

"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."

7-26-19
(Date)


(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS