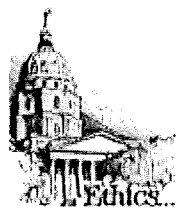


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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

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: **John C Brosz**
Address: **6612 SW MEADOWDALE DR**
Address2:
City: **TOPEKA** Zip: **66619**
Home Phone: **(720) 416-8627** Business Phone: Cell Phone: **(720) 416-8627**
County: **Shawnee** Email Address: **Vote@JohnBrosz.org**
Office Sought: **State Representative** District No.: **54**

Treasurer Date Appointed: **05/14/2020**
Treasurer Name: **John Baker**
Address: **3426 SW Arrowhead RD**
Address2:
City: **TOPEKA** State: **KS** Zip: **66614**
Home Telephone: Business Phone: Cell Phone: **(785) 787-3995**
Email Address: **john.baker@washburn.edu**

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: **5/14/2020 8:53:37 PM** Signature of Candidate: **John Brosz**

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