

[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: **Michael G Martin**
Address: **3846 SE Howard Dr.**
Address2:
City: **Topeka** Zip: **66605**
Home Phone: **(785) 845-6557** Business Phone: **(785) 845-6557** Cell Phone: **(785) 845-6557**
County: **Shawnee** Email Address: **Tfd140@gmail.com**
Office Sought: **State Representative** District No.: **57**

Treasurer Date Appointed: **02/14/2020**
Treasurer Name: **Cynthia Hooper-Bears**
Address: **10321 SW 61st St.**
Address2:
City: **Topeka** State: **KS** Zip: **66610**
Home Telephone: Business Phone: Cell Phone: **(785) 817-2553**
Email Address: **Cindymbears@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: **2/13/2020 9:33:48 PM** Signature of Candidate: **Michael G. Martin**

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