

[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: **Jeffrey A Zamrzla**  
Address: **2509 Brookwood Lane**  
Address2:  
City: **Salina** Zip: **67401**  
Home Phone: **(785) 452-9325** Business Phone: **(785) 452-9325** Cell Phone: **(785) 452-9325**  
County: **Saline** Email Address: **jeff@jzamrzla.net**  
Office Sought: **State Representative** District No.: **71**

**Treasurer** Date Appointed: **06/01/2020**  
Treasurer Name: **Jeffrey Zamrzla**  
Address: **2509 Brookwood Lane**  
Address2:  
City: **Salina** State: **KS** Zip: **67401**  
Home Telephone: **(785) 452-9325** Business Phone: **(785) 452-9325** Cell Phone: **(785) 633-7381**  
Email Address: **jeff@jzamrzla.net**

**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: **10/25/2020 10:29:18 PM** Signature of Candidate: **Jeffrey A Zamrzla**

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

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

**RECEIVED**  
JUN 16 2020  
SCOTT SCHWAB  
SECRETARY OF STATE

This is an (Check one)  Initial Appointment  Amended Statement  
(Please Type or Print)

**CANDIDATE**

Name <u>Jeffrey A Zamrzla</u>		
Street <u>2509 Brookwood Ln</u>		
City <u>Salina</u>	County <u>Saline</u>	Zip Code <u>67401</u>
Home Telephone <u>785-452-9325</u>	Business Telephone <u>—</u>	
Office Sought <u>KS House</u>	District No. <u>71</u>	

**TREASURER**

Date Appointed <u>June 1<sup>st</sup>, 2020</u>		
Name <u>Jeffrey A Zamrzla</u>		
Address <u>2509 Brookwood Ln.</u>		
City <u>Salina</u>	Zip Code <u>67401</u>	
Home Telephone <u>785-633-738</u>	Business Telephone <u>—</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."

6-4-2020  
(Date)

*Jeffrey A Zamrzla*  
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS