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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: **Emil Bergquist**  
Address: **6430 North Hydraulic Avenue**  
Address2:  
City: **Park City** Zip: **67219**  
Home Phone: **(316) 680-4697** Business Phone: **(316) 680-4697** Cell Phone: **(316) 680-4697**  
County: **Sedgwick** Email Address: **emilbergquist@sbcglobal.net**  
Office Sought: **State Representative** District No.: **91**

**Treasurer** Date Appointed: **08/19/2019**  
Treasurer Name: **Myron Higerd**  
Address: **2608 E. Burlington St.**  
Address2:  
City: **Park City** State: **KS** Zip: **67219**  
Home Telephone: **(316) 744-2885** Business Phone: Cell Phone: **(316) 300-8581**  
Email Address: **higerdm@sbcglobal.net**

**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: **8/19/2019 10:48:44 AM** Signature of Candidate: **Emil M. Bergquist**

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City: **Park City** Zip: **67219**  
Home Phone: **(316) 680-4697** Business Phone: **(316) 680-4697** Cell Phone: **(316) 680-4697**  
County: **Sedgwick** Email Address: **emilbergquist@sbcglobal.net**  
Office Sought: **State Representative** District No.: **91**

**Treasurer** Date Appointed: **02/16/2018**  
Treasurer Name: **Ralene Bergquist**  
Address: **6430 North Hydraulic Avenue**  
Address2:  
City: **Park City** State: **KS** Zip: **67219**  
Home Telephone: Business Phone: **(316) 262-8992** Cell Phone: **(316) 680-4025**  
Email Address: **emilbergquist@sbcglobal.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: **7/24/2018 10:30:34 AM** Signature of Candidate: **Emil M. Bergquist**

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