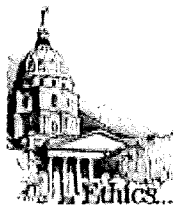


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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

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: **Lisa M Moser**
Address: **3063 26th Road**
Address2:
City: **Wh** Zip: **66521**
Home Phone: **(785) 456-3876** Business Phone: Cell Phone: **(785) 456-3876**
County: **Marshall** Email Address: **moserranch@moserranch.com**
Office Sought: **State Representative** District No.: **106**

Treasurer Date Appointed: **03/31/2020**
Treasurer Name: **Martha L. 'Pat' Brady**
Address: **2772 28th Road**
Address2:
City: **Vermillion** State: **KS** Zip: **66544**
Home Telephone: **(785) 396-4396** Business Phone: Cell Phone: **(785) 336-1039**
Email Address: **goirish@bluevalley.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: **4/3/2020 11:31:23 AM** Signature of Candidate: **Martha L. 'Pat' Brady**

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