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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: **Michael L Murphy**

Address: **35810 W Greenfield Rd**

Address2:

City: **Sylvia** Zip: **67581**

Home Phone: **(620) 486-2962** Business Phone: Cell Phone: **(620) 204-0416**

County: **Reno** Email Address: **ILikeMike114@gmail.com**

Office Sought: **State Representative** District No.: **114**

Treasurer Date Appointed: **01/15/2020**

Treasurer Name: **Janis Murphy**

Address: **35810 W Greenfield Rd**

Address2:

City: **Sylvia** State: **KS** Zip: **67581**

Home Telephone: **(620) 486-2962** Business Phone: Cell Phone: **(620) 669-7913**

Email Address: **janismurphy@gmail.com**

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: **10/9/2020 5:47:37 PM** Signature of Candidate: **Michael L Murphy**

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This is an (Check one) **Initial Appointment** **Amended Statement**

Candidate Candidate Name: **Michael L Murphy**
Address: **35810 W Greenfield Rd**
Address2:
City: **Sylvia** Zip: **67581**
Home Phone: **(620) 486-2962** Business Phone: Cell Phone: **(620) 727-6137**
County: **Reno** Email Address: **ILikeMike114@gmail.com**
Office Sought: **State Representative** District No.: **114**

Treasurer Date Appointed: **01/15/2020**
Treasurer Name: **Janis Murphy**
Address: **35810 W Greenfield Rd**
Address2:
City: **Sylvia** State: **KS** Zip: **67581**
Home Telephone: **(620) 486-2962** Business Phone: Cell Phone: **(620) 669-7913**
Email Address: **janismurphy@gmail.com**

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: **1/23/2020 8:39:50 AM** Signature of Candidate: **Michael L Murphy**

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