

[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: **Mark A Powls**

Address: **207 E. 4th Avenue**

Address2:

City: **Garnett** Zip: **66032**

Home Phone: **(785) 448-5553** Business Phone: **(785) 448-7721** Cell Phone: **(785) 448-7721**

County: **Anderson** Email Address: **mpvantagesolutionsllc@gmail.com**

Office Sought: **State Representative** District No.: **5**

Treasurer Date Appointed: **05/18/2020**

Treasurer Name: **Geni Gellhaus**

Address: **325 E. Park Rd**

Address2:

City: **Garnett** State: **KS** Zip: **66032**

Home Telephone: **(785) 204-2172** Business Phone: Cell Phone: **(785) 204-2172**

Email Address: **genigellhaus@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: **7/25/2020 11:58:15 AM** Signature of Candidate: **Mark Powls**

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