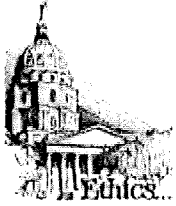


[Print this form](#) or [Go Back](#)



**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: **Les R Mason**
Address: **108 Arcadian Ct**
Address2:
City: **McPherson** Zip: **67460**
Home Phone: Business Phone: Cell Phone: **(620) 755-8237**
County: **McPherson** Email Address: **les.jogo@gmail.com**
Office Sought: **State Representative** District No.: **73**

Treasurer Date Appointed: **04/12/2020**
Treasurer Name: **Jennifer Mason**
Address: **618 Gildersleeve**
Address2:
City: **McPherson** State: **KS** Zip: **67460**
Home Telephone: Business Phone: Cell Phone: **(785) 844-0092**
Email Address: **simon.n.jamie@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: **4/12/2020 4:24:21 PM** Signature of Candidate: **Les Mason**

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