

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

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

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is an (Check one) Initial Appointment Amended Statement

CandidateCandidate Name: **Steve H Huebert**Address: **619 N Birch**

Address2:

City: **Valley Center** Zip: **67147**Home Phone: **(316) 755-1943** Business Phone: **(316) 253-6558** Cell Phone: **(315) 253-6558**County: **Sedgwick** Email Address: **shuebert77@sbcglobal.net**Office Sought: **State Representative** District No.: **90****Treasurer**Date Appointed: **03/01/2000**Treasurer Name: **Marsha Huebert**Address: **619 N Birch**

Address2:

City: **Valley Center** State: **KS** Zip: **67147**Home Telephone: **(316) 755-1943** Business Phone: **(316) 253-6177** Cell Phone: **(316) 253-6177**Email Address: **marsha@marshahuebert.com****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:

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: **10/25/2010 12:51:34 PM** Signature of Candidate: **Marsha Huebert**[Print this form](#) or [Go Back](#)