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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: **Sherri G Brantley**
Address: **651 NW 20th Ave**
Address2:
City: **Great Bend** Zip: **67530**
Home Phone: **(620) 617-1777** Business Phone: **(620) 617-1777** Cell Phone: **(620) 639-4379**
County: **Barton** Email Address: **sherribrantleyforkansas@gmail.com**
Office Sought: **State Representative** District No.: **112**

Treasurer

Date Appointed: **12/01/2023**
Treasurer Name: **Cindy Brooke**
Address: **2408 Williams St.**
Address2:
City: **Great Bend** State: **KS** Zip: **67530**
Home Telephone: **(620) 617-3779** Business Phone: **(620) 617-3779** Cell Phone: **(620) 617-3779**
Email Address: **cindybrooke@sbcglobal.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: **1/4/2024 10:10:55 AM** Signature of Candidate: **Sherri G. Brantley**

APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORMIVED
FOR CANDIDATE FOR STATE OFFICE DEC 04 2023

KS Governmental Ethics Commission

This is an (Check one)

Initial Appointment

Amended Statement

CANDIDATE

(Please Type or Print)

Name <u>Sherri Brantley</u>			
Mailing Address <u>651 NW 20th Ave</u>			
City <u>Great Bend</u>	County <u>Barton</u>	Zip Code <u>67530</u>	
Telephone <u>620-617-1777</u>	Email <u>sherribrantleyforkansas@gmail.com</u>		
Office Sought <u>House of Representative</u>	District No. <u>112</u>		

TREASURER

Date Appointed <u>11/20/2023</u>	
Name <u>Cindy Brooke</u>	
Mailing Address <u>P.O. Box 344</u>	
City <u>Great Bend</u>	Zip Code <u>67530</u>
Telephone <u>620-792-5885</u>	Email <u>TAXESBYCINDY@gmail.com</u>


OR CANDIDATE COMMITTEE

Date Appointed	
Chairperson's Name	
Mailing Address	
City	Zip Code
Telephone	Email
Treasurer's Name	
Mailing Address	
City	Zip Code
Telephone	Email

SIGNATURE

“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.”

11/26/2023
 (Date)


 (Signature of Candidate)

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