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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: **William S Clifford**

Address: **102 Drury Lane**

Address2:

City: **Garden City** Zip: **67846**

Home Phone: **(620) 275-4317** Business Phone: **(620) 275-7248** Cell Phone: **(620) 260-5799**

County: **Finney** Email Address: **cliff@fryeye.com**

Office Sought: **State Representative** District No.: **122**

Treasurer Date Appointed: **12/26/2021**

Treasurer Name: **Mark Davis**

Address: **PO Box 694**

Address2:

City: **Syracuse** State: **KS** Zip: **67878**

Home Telephone: Business Phone: Cell Phone: **(620) 384-4970**

Email Address: **markdavis@wbsnet.org**

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: **12/27/2021 2:13:02 PM** Signature of Candidate: **William S. Clifford**

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