

**APPOINTMENT OF  
TREASURER OR CANDIDATE COMMITTEE FORM  
FOR CANDIDATE FOR STATE OFFICE**

RECEIVED

JUN 18 2012

KS Governmental Ethics Commission

This is an (Check one)



Initial Appointment



Amended Statement

**CANDIDATE**

(Please Type or Print)

Name	Carl Kramer				
Street	615 N. Oliver				
City	Wichita	County	Sedgwick	Zip Code	67208
Home Telephone	316 687 2370	Business Telephone	N/A		
Office Sought	Senate	District No.	29 <sup>th</sup>		

**TREASURER**

Date Appointed					
Name	Carl Kramer				
Address	615 N. Oliver				
City	Wichita	Zip Code	67208		
Home Telephone	316-687-2370	Business Telephone	N/A		

**OR CANDIDATE COMMITTEE**

Date Appointed					
Chairperson's Name					
Address					
City		Zip Code			
Home Telephone		Business Telephone			
Treasurer's Name					
Address					
City		Zip Code			
Home Telephone		Business Telephone			

**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."

6-15-2012

(Date)



(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS