

[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**

**Candidate** Candidate Name: **Marshall E Christmann**  
Address: **816 South Grand**  
Address2:  
City: **Lyons** Zip: **67554**  
Home Phone: Business Phone: Cell Phone: **(620) 680-1222**  
County: **Rice** Email Address: **marshallchristmann@hotmail.com**  
Office Sought: **State Senator** District No.: **35**

**Treasurer** Date Appointed: **05/06/2014**  
Treasurer Name: **Elizabeth Christmann**  
Address: **816 South Grand**  
Address2:  
City: **Lyons** State: **KS** Zip: **67554**  
Home Telephone: Business Phone: Cell Phone: **(629) 680-0848**  
Email Address: **marshallchristmann@hotmail.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: **5/6/2014 7:33:50 PM** Signature of Candidate: **Marshall Christmann**

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