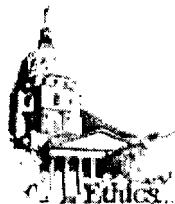


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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

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: **MARCI A FRANCISCO**
Address: **1101 OHIO**
Address2:
City: **LAWRENCE** Zip: **66044**
Home Phone: **(785) 842-6402** Business Phone: Cell Phone: **(785) 766-1473**
County: **Douglas** Email Address: **maf@sunflower.com**
Office Sought: **State Senator** District No.: **2**

Treasurer Date Appointed: **05/28/2016**
Treasurer Name: **Rita R Spradlin**
Address: **3144 Campfire Drive**
Address2:
City: **Lawrence** State: **KS** Zip: **66049**
Home Telephone: **(785) 749-4107** Business Phone: Cell Phone:
Email Address: **ritaspradlin@aol.com**

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.

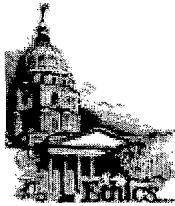
Executed on:

Date: **5/28/2016 3:42:32 PM** Signature of Candidate: **marcia a francisco**

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This is an (Check one) ☒ **Initial Appointment** ☐ **Amended Statement**

Candidate

Candidate Name: **marci francisco**
Address: **1101 Ohio ST**
City: **Lawrence** Zip: **66044**
Home Phone: Business Phone: Cell Phone:
County: **Douglas** Email Address: **maf@sunflower.com**
Office Sought: **State Senator** District No.: **2**

Treasurer

Date Appointed: **06/08/2004**
Treasurer Name: **Sally Hayden**
Address: **1718 Alabama ST**
City: **Lawrence** State: **KS** Zip: **66044**
Home Telephone: **7858417149** Business Phone: Cell Phone:
Email Address: **skh1974@gmail.com**

**Candidate
Committee**

Date Appointed:
Chairperson's Name:
Address:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
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: **7/6/2008 5:02:50 PM** Signature of Candidate: **marci francisco**

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