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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: **Matt Bristow**
Address: **211 Bonita Place**
Address2:
City: **Ellinwood** Zip: **67526**
Home Phone: **(303) 929-4749** Business Phone: Cell Phone:
County: **Barton** Email Address: **Jmattbristow@gmail.com**
Office Sought: **State Senator** District No.: **33**

Treasurer Date Appointed: **08/06/2016**
Treasurer Name: **Chelsea Mitchell**
Address: **2210 Forrest Ave**
Address2:
City: **Great Bend** State: **KS** Zip: **67530**
Home Telephone: **(805) 722-9920** Business Phone: Cell Phone:
Email Address: **bristowforsenate@gmail.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: **10/31/2016 6:43:09 PM** Signature of Candidate: **Matt Bristow**

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**APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM
FOR CANDIDATE FOR ~~LOCAL~~ ^{State} OFFICE**

RECEIVED

AUG 25 2016

GOVERNMENTAL ETHICS COMMISSION

This is an (Check one)

☐

Initial Appointment

☒

Amended Statement

CANDIDATE

(Please Type or Print)

Name	Matt Bristow		
Street	211 Bonita Place		
City	Elliswood	County	Barton
Zip Code	67526		
Home Telephone	303 929 4749	Business Telephone	620 564 2923
Office Sought	State Senator		District No. 33

TREASURER

Date Appointed	August 13, 2016		
Name	Chelsea Mitchell		
Address	2210 Forest		
City	Great Bend	Zip Code	67530
Home Telephone	805 722 9920	Business Telephone	

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."

8/13/2016

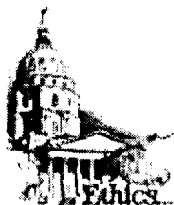
(Date)

M Bristow

(Signature of Candidate)

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

Candidate Candidate Name: **Matt Bristow**
Address: **211 bonita place**
Address2:
City: **ellinwood** Zip: **67526**
Home Phone: Business Phone: Cell Phone: **(303) 929-4749**
County: **Barton** Email Address: **bristowforsenate@gmail.com**
Office Sought: **State Senator** District No.: **33**

Treasurer Date Appointed: **06/16/2016**
Treasurer Name: **Matt Bristow**
Address: **211 bonita place**
Address2:
City: **ellinwood** State: **KS** Zip: **67526**
Home Telephone: Business Phone: Cell Phone: **(303) 929-4749**
Email Address: **bristowforsenate@gmail.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:
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: **7/25/2016 4:24:14 PM** Signature of Candidate: **Matt Bristow**

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

RECEIVED
JUN 13 2016
KS Governmental Ethics Commission

This is an (Check one)

☒

Initial Appointment

☐

Amended Statement

CANDIDATE

(Please Type or Print)

Name <u>Matt Brisson</u>		
Street <u>211 Santa Fe</u>		
City <u>Ellis</u>	County <u>Barton</u>	Zip Code <u>67526</u>
Home Telephone <u>303-929-4749</u>		Business Telephone
Office Sought <u>State Senate</u>		District No. <u>35</u>

TREASURER

Date Appointed <u>6-8-16</u>	
Name <u>211 Santa Fe Matt Brisson</u>	
Address <u>211 Santa Fe</u>	
City <u>Ellis</u>	Zip Code <u>67526</u>
Home Telephone <u>303-929-4749</u> Business Telephone	

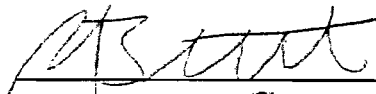
OR CANDIDATE COMMITTEE

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."

6-8-16
(Date)


(Signature of Candidate)

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