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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: **Andrew Mall**
Address: **PO Box 3805**
Address2:
City: **Shawnee** Zip: **66203**
Home Phone: **(913) 238-1662** Business Phone: Cell Phone:
County: Email Address: **mallforkansas@gmail.com**
Office Sought: **State Senator** District No.: **10**

Treasurer

Date Appointed: **01/19/2023**
Treasurer Name: **Nicole Mall**
Address: **P.O.Box 3805**
Address2:
City: **Shawnee** State: **KS** Zip: **66203**
Home Telephone: Business Phone: Cell Phone:
Email Address: **nicole@linkrealtykc.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: **1/19/2023 8:11:08 PM** Signature of Candidate: **Andrew Mall**

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Home Phone: **(913) 238-1662** Business Phone: Cell Phone:
County: Email Address: **andrew@linkrealtykc.com**
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Treasurer

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Email Address: **nicole@linkrealtykc.com**

**Candidate
Committee**

Date Appointed:
Chairperson's Name:
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Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
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Home Telephone: Business Phone: Cell Phone:

Email Address:

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Executed on:

Date: **1/19/2023 1:56:22 PM** Signature of Candidate: **Andrew Mall**