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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 Name: Lillian G Lingenfelter

Address: 1715 w. wilman ct

Address2:

City: Emporia Zip: 66801

Home Phone: (913) 530-6709 Business Phone: Cell Phone: County: Lyon Email Address: lglingenfelter@gmail.com

Office Sought: State Senator District No.: 17

Treasurer Date Appointed: 05/23/2024

Treasurer Name: Jared Germann

Address: 1715 w. wilman ct

Address2:

City: Emporia State: KS Zip: 66801

Home Telephone: (316) 648-5443 Business Phone: Cell Phone:

Email Address: jaredjgermann@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: 7/25/2024 12:29:49 PM Signature of Candidate: Lillian Lingenfelter

## APPOINTMENT OF

## TREASURER OR CANDIDATE COMMITTEE FORM

FOR CANDIDATE FOR STATE OFFICE

FUR CANDIDATE FOR STATE OFFICE
This is an (Check one)  [CANDIDATE FOR STATE OFFICE    Company   C
Name Will A Lindengetter
Name LILIAN A. LINGENFELTEY  Mailing Address 1715 W. WILMAN CT
City EMODRA County LYM Zip Code (11801
Telephone 913 530 LOTO Email Calingenfuller @ g Mail com
Office Sought So
Chief Series VS all Miles
TREASURER
Date Appointed (13/24)
Name Tared Germann
Mailing Address 100 PO BOX (U)
City EMPONO Zip Code [[ [SU]
Telephone 31/01485443 Email Taved Tarmanno amail com
OR CANDIDATE COMMITTEE  Date Appointed
Chairperson's Name
Mailing Address
City Zip Code
Telephone Email
Treasurer's Name
Mailing Address
City Zip Code
Telephone Email
SIGNATURE
"I declare that this statement has been examined by me and to the best of my knowledge and belief is true, orrect and complete. I understand that the intentional failure to file this document or intentionally filing a alse document is a class A misdemeanor."
(Signature of Candidate)
CEE DEVEDCE CIDE FOR INCTRICTIONS

Governmental Ethics Commission

Rev.2021