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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: **Michael Murphy**  
Address: **35810 W Greenfield Road**  
Address2:  
City: **Sylvia** Zip: **67581**  
Home Phone: **(620) 486-2962** Business Phone: Cell Phone: **(620) 204-0416**  
County: **Reno** Email Address: **ILikeMike4KS@gmail.com**  
Office Sought: **State Senator** District No.: **34**

**Treasurer**

Date Appointed:  
Treasurer Name:  
Address:  
Address2:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:  
Email Address:

**Candidate Committee**

Date Appointed: **09/10/2023**  
Chairperson's Name: **Michael Murphy**  
Address: **35810 W Greenfield Road**  
Address2:  
City: **Sylvia** State: **KS** Zip: **67581**  
Home Telephone: **(620) 486-2962** Business Phone: Cell Phone: **(620) 204-0416**  
Email Address: **ILikeMike4KS@gmail.com**

Date Appointed: **09/10/2023**  
Treasurer's Name: **Janis Murphy**  
Address: **35810 W Greenfield Road**  
Address2: **35810 W Greenfield Road**  
City: **Sylvia** State: **KS** Zip: **67581**  
Home Telephone: **(620) 486-2962** Business Phone: Cell Phone: **(620) 669-7913**

Email Address: **janismurphy@gmail.com**

**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: **9/17/2023 10:14:36 PM** Signature of Candidate: **Michael Murphy**