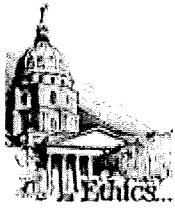


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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

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: **Mark B Steffen**
Address: **3500 N Mayfield Rd**
Address2:
City: **Hutchinson** Zip: **67502**
Home Phone: **(620) 802-1188** Business Phone: **(620) 802-1188** Cell Phone: **(620) 802-1188**
County: Email Address: **steffenmd@hotmail.com**
Office Sought: **State Senator** District No.: **34**

Treasurer Date Appointed: **04/28/2020**
Treasurer Name: **Tess Anderson**
Address: **1001 Barberry Drive**
Address2:
City: **Hutchinson** State: **KS** Zip: **67502**
Home Telephone: **(620) 259-6725** Business Phone: **(620) 770-6331** Cell Phone: **(620) 770-6331**
Email Address: **cbax2@att.net**

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: **4/28/2020 3:00:13 PM** Signature of Candidate: **Mark Steffen**

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