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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: **Elaine S Bowers**  
Address: **1326 N. 150th Rd.**  
Address2:  
City: **Concor** Zip: **66901**  
Home Phone: **(785) 243-4256** Business Phone: **(785) 243-3325** Cell Phone: **(785) 614-1415**  
County: **Cloud** Email Address: **elaine@concordiaautomart.com**  
Office Sought: **State Senator** District No.: **36**

**Treasurer** Date Appointed: **01/10/2019**  
Treasurer Name: **Sharon Knox**  
Address: **8330 Ryley Lane**  
Address2:  
City: **Lincoln** State: **NE** Zip: **68512**  
Home Telephone: **(785) 275-1018** Business Phone: **(785) 243-3325** Cell Phone:  
Email Address: **srknox@hotmail.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: **1/10/2019 3:26:42 PM** Signature of Candidate: **Elaine S Bowers**

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