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

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is an (Check one) ☐ Initial Appointment ☒ Amended Statement

Candidate Candidate Name: **Ken Selzer**
Address: **12504 Buena Vista**
Address2:
City: **Leawood** Zip: **66209**
Home Phone: Business Phone: Cell Phone: **(913) 777-8245**
County: **Johnson** Email Address: **ken@kansansforselzer.com**
Office Sought: **Insurance Commissioner** District No.:

Treasurer Date Appointed: **01/30/2016**
Treasurer Name: **Mike Marsh**
Address: **6275 W 157th St**
Address2:
City: **Overland Park** State: **KS** Zip: **66223**
Home Telephone: **(913) 488-8313** Business Phone: **(816) 285-6776** Cell Phone: **(913) 488-8313**
Email Address: **mmarsh@marksnelsoncpa.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:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

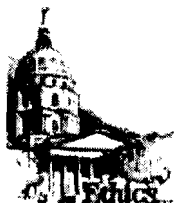
I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **1/30/2016 1:48:52 PM** Signature of Candidate: **Ken Selzer**

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Home Phone: Business Phone: Cell Phone: **(913) 777-8245**
County: **Johnson** Email Address: **ken@kansansforselzer.com**
Office Sought: **Insurance Commissioner** District No.:

Treasurer Date Appointed: **05/24/2013**
Treasurer Name: **John Wurzer**
Address: **12501 Buena Vista**
Address2:
City: **Leawood** State: **KS** Zip: **66209**
Home Telephone: Business Phone: Cell Phone: **(913) 486-5642**
Email Address: **jwurzer@kc.rr.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:
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: **1/10/2014 8:58:34 AM** Signature of Candidate: **Ken Selzer**

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