

[Print](#) this form or [Go Back](#)



**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: **Vicki L Schmidt**

Address: **5906 SW 43rd CT**

Address2:

City: **Topeka** Zip: **66610**

Home Phone: **(785) 267-4686** Business Phone: Cell Phone: **(785) 554-8601**

County: **Shawnee** Email Address: **vicki.schmidt@mac.com**

Office Sought: **Insurance Commissioner** District No.:

Treasurer Date Appointed: **01/29/2018**

Treasurer Name: **Brad Koehn**

Address: **2833 SW Jewell**

Address2:

City: **Topeka** State: **KS** Zip: **66611**

Home Telephone: **(785) 230-0853** Business Phone: **(785) 230-0853** Cell Phone: **(785) 230-0853**

Email Address: **BKoehn@shrinenet.org**

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: **6/30/2022 10:35:12 AM** Signature of Candidate: **Vicki L Schmidt**

[Print this form](#) or [Go Back](#)



**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: **Vicki L Schmidt**

Address: **5906 SW 43rd CT**

Address2:

City: **Topeka** Zip: **66610**

Home Phone: **(785) 267-4686** Business Phone: Cell Phone: **(785) 554-8601**

County: **Shawnee** Email Address: **vicki.schmidt@mac.com**

Office Sought: **Insurance Commissioner** District No.:

Treasurer Date Appointed: **01/29/2018**

Treasurer Name: **Brad Koehn**

Address: **3630 SW Burlingame Rd.**

Address2:

City: **Topeka** State: **KS** Zip: **66611**

Home Telephone: **(785) 357-4012** Business Phone: **(785) 234-3427** Cell Phone:

Email Address: **BKoehn@btandcocpa.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: **1/30/2018 10:16:16 AM** Signature of Candidate: **Vicki Schmidt**

[Print this form](#) or [Go Back](#)