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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: **Brian A McClendon**
Address: **4311 West 6th Street**
Address2: **Suite D**
City: **Lawrence** Zip: **66049**
Home Phone: **(785) 350-6536** Business Phone: **(785) 764-1992** Cell Phone: **(785) 764-1992**
County: Email Address: **bam@bam4kansas.com**
Office Sought: **Secretary of State** District No.:

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

Candidate Date Appointed: **01/22/2018**
Committee Chairperson's Name: **Brian McClendon**
Address: **PO Box 863**
Address2:
City: **Lawrence** State: **KS** Zip: **66044**
Home Telephone: **(785) 350-6536** Business Phone: **(785) 764-1992** Cell Phone: **(785) 764-1992**
Email Address: **scott@bam4kansas.com**

Date Appointed: **01/22/2018**
Treasurer's Name: **Sandra Praeger**
Address: **3601 Quail Creek Court**
Address2:
City: **Lawrence** State: **KS** Zip: **66047**
Home Telephone: **(785) 841-3554** Business Phone: **(785) 764-1992** Cell Phone: **(785) 764-1992**

Email Address: **scott@bam4kansas.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: **7/30/2018 10:57:50 AM** Signature of Candidate: **Brian A. McClendon**

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This is an (Check one) Initial Appointment Amended Statement

Candidate Candidate Name: **Brian A McClendon**
Address: **4311 West 6th Street**
Address2: **Suite D**
City: **Lawrence** Zip: **66049**
Home Phone: **(785) 350-6536** Business Phone: **(785) 764-1992** Cell Phone: **(785) 764-1992**
County: Email Address: **bam@bam4kansas.com**
Office Sought: **Secretary of State** District No.:

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

Candidate Date Appointed: **01/22/2018**
Committee Chairperson's Name: **Brian McClendon**
Address: **PO Box 863**
Address2:
City: **Lawrence** State: **KS** Zip: **66044**
Home Telephone: **(785) 350-6536** Business Phone: **(785) 764-1992** Cell Phone: **(785) 764-1992**
Email Address: **scott@bam4kansas.com**

Date Appointed: **01/22/2018**
Treasurer's Name: **Sanra Praeger**
Address: **3601 Quail Creek Court**
Address2:
City: **Lawrence** State: **KS** Zip: **66047**
Home Telephone: **(785) 841-3554** Business Phone: **(785) 764-1992** Cell Phone: **(785) 764-1992**

Email Address: **scott@bam4kansas.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: **7/29/2018 3:02:28 PM** Signature of Candidate: **Brian McClendon**

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For Candidate For State Office**

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Fax (785) 296-2548
ethics.kansas.gov

This is an (Check one) Initial Appointment Amended Statement

Candidate Candidate Name: **Brian A McClendon**
Address: **1200 Oread Ave**
Address2: **#703**
City: **Lawrence** Zip: **66044**
Home Phone: **(785) 350-6536** Business Phone: **(785) 764-1992** Cell Phone: **(785) 764-1992**
County: Email Address: **scott@scottbpoor.com**
Office Sought: **Secretary of State** District No.:

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

Candidate Date Appointed: **01/22/2018**
Committee Chairperson's Name: **Brian McClendon**
Address: **PO Box 863**
Address2:
City: **Lawrence** State: **KS** Zip: **66044**
Home Telephone: **(785) 350-6536** Business Phone: **(785) 764-1992** Cell Phone: **(785) 764-1992**
Email Address: **scott@bam4kansas.com**

Date Appointed: **01/22/2018**
Treasurer's Name: **Sanra Praeger**
Address: **3601 Quail Creek Court**
Address2:
City: **Lawrence** State: **KS** Zip: **66047**
Home Telephone: **(785) 841-3554** Business Phone: **(785) 764-1992** Cell Phone: **(785) 764-1992**

Email Address: **scott@bam4kansas.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: **1/22/2018 8:51:50 AM** Signature of Candidate: **Brian A. McClendon**

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