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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: **Vicki L Schmidt**
Address: **5906 SW 43rd CT**
Address2:
City: **Topeka** Zip: **66610**
Home Phone: Business Phone: Cell Phone: **(785) 554-8601**
County: **Shawnee** Email Address: **vicki.schmidt@mac.com**
Office Sought: **Insurance Commissioner** District No.:

Treasurer

Date Appointed: **01/11/2025**
Treasurer Name: **Brad Koehn**
Address: **2324 SW Mayfair Pl**
Address2:
City: **Topeka** State: **KS** Zip: **66611**
Home Telephone: **(785) 230-0853** Business Phone: Cell Phone: **(785) 230-0853**
Email Address: **BKoehn@shrinenet.org**

**Candidate
Committee**

Date Appointed:
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: **1/11/2025 1:50:28 PM** Signature of Candidate: **Vicki L Schmidt**

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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**