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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
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Candidate Candidate Name: Jim Porter

Address: 501 S 7th

Address2:

City: Fredonia Zip: 66736

Home Phone: (620) 378-4142 Business Phone: (620) 378-4177 Cell Phone: (316) 617-6779

County: Wilson Email Address: nporter5@embarqmail.com Office Sought: State Board of Education District No.: 9

Treasurer Date Appointed: 05/27/2014

Treasurer Name: Fred Lorentz

Address: 606 S 7th

Address2:

City: Fredonia State: KS Zip: 66736

Home Telephone: (620) 378-3863 Business Phone: Cell Phone: (620) 288-0318

Email Address: fvlorentz@embarqmail.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:

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.

Date: 7/21/2014 1:56:43 PM Signature of Candidate: Fred Lorentz

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## APPOINTMENT OF

## FILED

## MAY 29 2014 FOR CANDIDATE FOR STATE OFFICE KRIS W. KOBACH CORRESTABLY OF STATE

S Governmental Ethics Commission	SECRETARY OF STAT		
This is an (Check one) Initial Appointment Amended Statemen	nt		
CANDIDATE (Please Type or Print)			
Name Sim Contra			
Street SOI S 7-Lh			
City FREDONIA County WISCAL Zip Code 6673	6		
	-417		
Office Sought State Borns & Education District No. 9			
TREASURER			
Date Appointed 5/87/3014			
Name C FRRD LORENTZ			
Address 606 57-14			
City FRADENIA Zip Code 60	31		
Home Telephone 670-378-3563 Business Telephone	<u> </u>		
2.6 2.6 2.6 2.6 2.6 2.6 2.6 2.6 2.6 2.6			
OR CANDIDATE COMMITTEE  Date Appointed			
Chairperson's Name			
Address			
City Zip Code			
Home Telephone Business Telephone			
Treasurer's Name			
Address			
City Zip Code			
Home Telephone Business Telephone			
SIGNATURE			
I declare that this statement has been examined by me and to the best of my knowledge and belief is true, orrect and complete. I understand that the intentional failure to file this document or intentionally filing a			
alse document is a class A misdemeanor."			
and deciment in a class /1 mindemental.			
5/36/2014			
(Date) (Signature of Candida	(Signature of Candidate)		

SEE REVERSE SIDE FOR INSTRUCTIONS