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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: **Trey Joy**
Address: **811 Boulevard**
City: **Smith Center** Zip: **66967**
Home Phone: Business Phone: Cell Phone: **7852828788**
County: **Smith** Email Address: **treyjoy@hotmail.com**
Office Sought: **State Representative** District No.: **109**

Treasurer

Date Appointed: **01/22/2010**
Treasurer Name: **Tranda Frieling**
Address: **412 B. ST**
City: **Smith Center** State: **KS** Zip: **66967**
Home Telephone: Business Phone: Cell Phone: **7852821220**
Email Address: **tranda@ruraltel.net**

**Candidate
Committee**

Date Appointed:
Chairperson's Name:
Address:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
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: **2/22/2010 10:53:05 PM** Signature of Candidate: **Trey A Joy**

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This is an (Check one) **Initial Appointment** **Amended Statement**

Candidate

Candidate Name: **Trey Joy**
Address: **811 Boulevard**
City: **Smith Center** Zip: **66967**
Home Phone: Business Phone: Cell Phone: **7852825346**
County: **Smith** Email Address: **treyjoy@hotmail.com**
Office Sought: **State Representative** District No.: **109**

Treasurer

Date Appointed: **01/22/2010**
Treasurer Name: **Tranda Frieling**
Address: **412 B. ST**
City: **Smith Center** State: **KS** Zip: **66967**
Home Telephone: Business Phone: Cell Phone: **7852821220**
Email Address: **tranda@ruraltel.net**

**Candidate
Committee**

Date Appointed:
Chairperson's Name:
Address:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
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: **1/22/2010 12:40:50 PM** Signature of Candidate: **Trey Allen Joy**

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