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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:Becky Nioce	
	Address: 825 SW Oakley AVE	
	Address2: City: Topeka Zip: 66606 Home Phone: (785) 232-0513 Business Phone: Cell Phone:	
		County: Shawnee Email Address: beckynioce@hotmail.com
		Office Sought: State Representative District No.: 55
	Treasurer	Date Appointed: 06/18/2010
		Treasurer Name: Robert Cucciniello
Address: 1940 SW Pembroke Lane		

Address2: City: Topeka State: KS Zip: 66604 Home Telephone: (785) 232-0072 Business Phone: Cell Phone: (785) 969-2433 Email Address: bob@cucciniello.com

Candidate Date Appointed: Committee Date Appointed: 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: 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: 7/27/2012 1:09:20 AM Signature of Candidate: Becky Nioce

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APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORMRECEIVED
FOR CANDIDATE FOR STATE OFFICE JUN 2 1 2012
This is an (Check one) Initial Appointment Amended Statement Statement CANDIDATE (Please Type or Print) Name Beckil Nicce Street 825 SW Oakley, AVE City Decka County ShowNep Zip Code Old 606 Home Telephone 785 23205 Business Telephone 785 806 9838 Office Sought State Representative District No. 55 TREASURER Date Appointed June 20, 2012 Name Robert Cuccincello Address Generative District No. 55 City Tope Ka Zip Code 66604 Home Telephone 785-232-05 Business Telephone 785 996 969 2433
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, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor." JUNE JUNE (Date) Date
SEE REVERSE SIDE FOR INSTRUCTIONS
Governmental Ethics Commission Rev.2000