

**APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM
FOR CANDIDATE FOR STATE OFFICE**

FILED
JUN 25 2014
KRIS W. KOBACH
SECRETARY OF STATE

This is an (Check one) Initial Appointment Amended Statement

CANDIDATE (Please Type or Print)

Name	CLARY SWARTZENRUBER		
Street	538 S. COLLEGE AVE.		
City	Salina	County	Saline
		Zip Code	67401
Home Telephone	7858209347	Business Telephone	
Office Sought	KS STATE REPRESENTATIVE		District No. 69

TREASURER

Date Appointed	6-25-14		
Name	JOHNNA VOSSER		
Address	1027 SECT AVE.		
City	Salina	Zip Code	67401
Home Telephone	7836207157	Business Telephone	

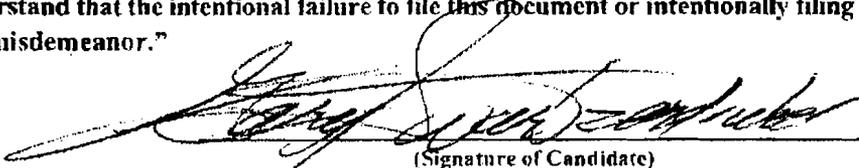
OR CANDIDATE COMMITTEE

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."

6-25-14
(Date)


(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

RECEIVED APPOINTMENT OF TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR STATE OFFICE JUN 06 2014

FILED JUN 04 2014 KRIS W. KOBACH SECRETARY OF STATE

KS Governmental Ethics Commission

This is an (Check one) Initial Appointment Amended Statement (Please Type or Print)

CANDIDATE Name: GARY SWARTZENBURGER Street: 528 S. COLLEGE AVE City: SALINA County: SALINE Zip Code: 67401 Home Telephone: 785 820 9217 Business Telephone: SAME Office Sought: State Representative District No.: 69

TREASURER

Date Appointed: 5-30-14 Name: ROBERT D HOMOIKA, SR Address: 517 WEST IRON AVE City: SALINA Zip Code: 67401 Home Telephone: 785 493 5608 Business Telephone:

OR CANDIDATE COMMITTEE

Form with fields for 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."

6-4-14 (Date) Gary Swartzenburger (Signature of Candidate)

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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: **Gary L Swartzendruber**
Address: **528 So. College**
Address2:
City: **Salina** Zip: **67401**
Home Phone: **(785) 820-9247** Business Phone: Cell Phone:
County: **Saline** Email Address: **swartzengary@yahoo.com**
Office Sought: **State Representative** District No.: **69**

Treasurer Date Appointed: **07/10/2012**
Treasurer Name: **Robert Homolka**
Address: **517 W. Iron**
Address2:
City: **Salina** State: **KS** Zip: **67401**
Home Telephone: **(785) 825-1976** Business Phone: Cell Phone: **(785) 493-5508**
Email Address: **rhomolka@cox.net**

**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:
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: **10/29/2012 6:42:25 PM** Signature of Candidate: **Gary Swartzendruber**

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