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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](http://www.kansas.gov/ethics)

This is an (Check one) ☒ Initial Appointment ☐ Amended Statement

**Candidate** Candidate Name: **Nicholas L Reinecker**  
Address: **504 S. Maple**  
Address2:  
City: **Inman** Zip: **67546**  
Home Phone: Business Phone: Cell Phone: **(620) 755-8726**  
County: **McPherson** Email Address: **nicholasleereinecker@gmail.com**  
Office Sought: **State Representative** District No.: **73**

**Treasurer** Date Appointed: **10/10/2013**  
Treasurer Name: **Kathryn Reinecker**  
Address: **504 S. Maple**  
Address2:  
City: **Inman** State: **KS** Zip: **67546**  
Home Telephone: **(620) 755-8726** Business Phone: Cell Phone:  
Email Address: **nicholasleereinecker@gmail.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:  
Email Address:

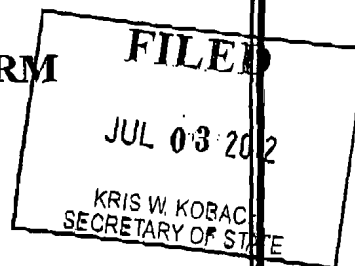
**I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.**

Executed on:

Date: **10/10/2013 11:33:06 AM** Signature of Candidate: **Nicholas Lee Reinecker**

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



This is an (Check one)



Initial Appointment



Amended Statement

**CANDIDATE**

(Please Type or Print)

Name <u>Nicholas Lee Reinecker</u>		
Street <u>504 S. Maple</u>		
City <u>Enmen</u>	County <u>McPherson</u>	Zip Code <u>67546</u>
Home Telephone <u>620-755-1380</u>	Business Telephone	
Office Sought <u>House Rep #2</u>	District No. <u>72</u>	

**TREASURER**

Date Appointed <u>7-2-12</u>	
Name <u>Nicholas Lee Reinecker</u>	
Address <u>504 S. Maple</u>	
City <u>Enmen</u>	Zip Code <u>67546</u>
Home Telephone <u>620-755-1380</u>	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."

7-2-12  
(Date)

Nicholas Lee Reinecker  
(Signature of Candidate)

**SEE REVERSE SIDE FOR INSTRUCTIONS**