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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: **Bob Booth**
Address: **431 N. Broadway**
Address2: **P.O. Box 252**
City: **Sterling** Zip: **67579**
Home Phone: **(620) 278-2852** Business Phone: Cell Phone: **(620) 278-6000**
County: **Rice** Email Address: **bbooth1@cox.net**
Office Sought: **State Representative** District No.: **114**

Treasurer

Date Appointed: **06/11/2012**
Treasurer Name: **Kathy Booth**
Address: **431 N. Broadway**
Address2: **P.O. Box 252**
City: **Sterling** State: **KS** Zip: **67579-0252**
Home Telephone: **(620) 278-2852** Business Phone: Cell Phone: **(620) 278-6001**
Email Address: **kbooth2@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: **6/20/2012 7:45:50 PM** Signature of Candidate: **Bob Booth**

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