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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: Terry Manies

Address: PO Box 266

Address2:

City: Lecompton Zip: 66050

Home Phone: Business Phone: Cell Phone: (785) 550-1894 County: Douglas Email Address: terry4kansas45@gmail.com

Office Sought: State Representative District No.: 45

Treasurer Date Appointed: 06/20/2016

Treasurer Name: Rex Gardner

Address: 4621 Trail Rd

Address2:

City: Lawrence State: KS Zip: 66049

Home Telephone: Business Phone: Cell Phone: (785) 550-1894

Email Address: kansasguy@wowway.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:

Address: 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: 7/24/2016 1:26:00 PM Signature of Candidate: Terry Manies

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APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM

FILED

Rev.2000

FOR CANDIDATE FOR STATE OFFICE	MAY 1 2 4
This is an (Check one) Initial Appointment Amended Statement CANDIDATE (Please Type or Print)	KRIS W. KOBS SECRETARY OF
Name TERRY A. MANIES	
Street 370 N. 1700+6 RD	
City LECOMPTON County DOUGLAS Zip Code 66050	
Home Telephone (785) 550 - 7286 Business Telephone (785) 550 - 7	286
Office Sought State House of Reps. District No. 45	
TREASURER	
Date Appointed 5/11/16	
Name REX GERDNER	
Address 4621 TRAIL RD.	
City LAWRENCE Zip Code (0404	9
Home Telephone 785-550 - 1894 Business Telephone 785-550 - 18	894
OR CANDIDATE COMMITTEE Date Appointed	
Chairperson's Name	
Address	
City Zip Code	
Home Telephone Business Telephone	
Trensurer'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 correct and complete. I understand that the intentional failure to file this document or integral and complete is a class A misdemeanor." Signature of Candidate Candida	· [1
SEE DEVEDSE SIDE EOD INSTRUCTIONS	

Governmental Ethics Commission