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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: **Adrienne Olejnik**  
Address: **PO Box 593**  
Address2:  
City: **Rossville** Zip: **66533**  
Home Phone: Business Phone: Cell Phone: **(785) 640-8787**  
County: **Shawnee** Email Address: **adrienneolejnik@gmail.com**  
Office Sought: **State Representative** District No.: **51**

**Treasurer** Date Appointed: **10/29/2015**  
Treasurer Name: **Daniel Klaassen**  
Address: **3009 SW Huntoon St.**  
Address2:  
City: **Topeka** State: **KS** Zip: **66604**  
Home Telephone: Business Phone: Cell Phone: **(316) 772-8656**  
Email Address: **klaassendan@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:  
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: **6/24/2016 11:10:18 AM** Signature of Candidate: **Adrienne Olejnik**

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

**FILED**  
  
OCT 29 2015  
  
KRIS W. KOBACH  
SECRETARY OF STATE

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

**CANDIDATE**

Name <b>Adrienne Olejnik</b>		
Street <b>611 Green Street</b>		
City <b>Rossville</b>	County <b>SN</b>	Zip Code <b>66533</b>
Home Telephone <b>785-640-8787</b>	Business Telephone <b>785-584-6454</b>	
Office Sought <b>State House of Representatives</b>	District No. <b>51</b>	

**TREASURER**

Date Appointed	
Name	
Address	
City	Zip Code
Home Telephone	Business Telephone

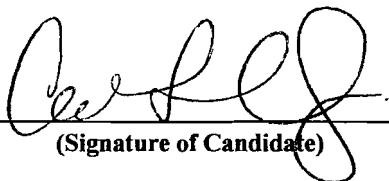
**OR CANDIDATE COMMITTEE**

Date Appointed	<b>10/29/2015</b>
Chairperson's Name	<b>Adrienne Olejnik</b>
Address <b>611 Green Street ; PO Box 593</b>	
City <b>Rossville</b>	Zip Code <b>66533</b>
Home Telephone <b>785-640-8787</b>	Business Telephone
Treasurer's Name <b>Daniel Klaassen</b>	
Address <b>4121 SE Corinth Court</b>	
City <b>Tecumseh</b>	Zip Code <b>66542</b>
Home Telephone <b>316-772-8656</b>	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."

10/29/2015  
(Date)

  
(Signature of Candidate)

**SEE REVERSE SIDE FOR INSTRUCTIONS**