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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: **Scott J Barnhart**  
Address: **4019 Louisiana Rd**  
Address2:  
City: **Ottawa** Zip: **66067**  
Home Phone: Business Phone: Cell Phone: **(785) 214-2042**  
County: **Franklin** Email Address: **scott@scottbarnhart.com**  
Office Sought: **State Representative** District No.: **59**

**Treasurer** Date Appointed: **06/12/2014**  
Treasurer Name: **Scott Barnhart**  
Address: **4019 Louisiana Rd**  
Address2:  
City: **Ottawa** State: **KS** Zip: **66067**  
Home Telephone: **(785) 214-2042** Business Phone: **(785) 214-2042** Cell Phone: **(785) 214-2042**  
Email Address: **scott@scottbarnhart.com**

**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: **6/12/2014 9:36:11 AM** Signature of Candidate: **Scott J. Barnhart**

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