## APPOINTMENT OF

## TREASURER OR CANDIDATE COMMITTEE FORM

FOR CANDIDATE FOR STATE OFFICE

This is an (Check one) Initial Appointment Amended Statement
This is an (Check one) Initial Appointment Amended Statement  CANDIDATE (Please Type or Print)
Name Clay Aurand
Street 810 Shady Land
City Belleville 165 County Republic Zip Code 66935
Home Telephone 785 527 - 2007 Business Telephone 785 - 527 - 0997
Office Sought State Representative District No. 106
TREASURER
Date Appointed 5/27/16
Name Judy Allen
Address 552 17 RD
City Haddam K5 Zip Code 669 44
Home Telephone 785-778 - 2425 Business Telephone 785-527-4506
Date Appointed Chairperson's Name
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, orrect and complete. I understand that the intentional failure to file this document or intentionally filing a alse document is a class A misdemeanor."
5/27/16 Cly Auran
(Date) (Signature of Candidate)

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Governmental Ethics Commission

Rev.2000

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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: Clay B Aurand

Address: 810 Shady Lane

Address2:

City: Belleville Zip: 66935-2413

Home Phone: (785) 527-0997 Business Phone: (785) 527-0997 Cell Phone: (785) 527-0997

County: Republic Email Address: caurand\_109@yahoo.com

Office Sought: State Representative District No.: 106

Treasurer Date Appointed: 06/01/1994

Treasurer Name: Lorna Lauritzen

Address: 2063 30 Road

Address2:

City: Courtland State: KS Zip: 66939

Home Telephone: (785) 361-4937 Business Phone: Cell Phone: (785) 527-3625

Email Address: dllauritzen@ruraltel.net

Candidate Committee Date Appointed:
Chairperson's Name:

Address: Address2: City: State: Zip:

Oity 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: 7/30/2012 11:40:50 AM Signature of Candidate: Lorna J Lauritzen

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