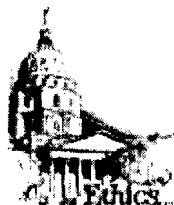


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Campaign Finance Appointment of Treasurer or Candidate Committee Form For Candidate For State Office

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: **Todd Frye**
Address: **205 N. 11th Street**
Address2:
City: **Marysville** Zip: **66508**
Home Phone: Business Phone: Cell Phone: **(785) 747-6833**
County: **Marshall** Email Address: **fryeforkansas@gmail.com**
Office Sought: **State Representative** District No.: **106**

Treasurer Date Appointed: **06/01/2016**
Treasurer Name: **Bryan J Kracht**
Address: **1505 Broadway**
Address2:
City: **Marysville** State: **KS** Zip: **66508**
Home Telephone: Business Phone: Cell Phone: **(785) 562-6884**
Email Address: **Bryan.Kracht@fbfs.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:
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: **7/25/2016 2:01:41 PM** Signature of Candidate: **Todd Frye**

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

FORM FILED
MAY 23 2016
KRIS W. KOBACH
SECRETARY OF STATE

This is an (Check one) Initial Appointment Amended Statement

CANDIDATE

(Please Type or Print)

Name <i>Todd E. Frye</i>		
Street <i>205 N 11th Street</i>		
City <i>Marysville</i>	County <i>Marshall</i>	Zip Code <i>66508</i>
Home Telephone <i>785-562-2144</i>	Business Telephone <i>785-859-4056</i>	
Office Sought <i>Representative</i>	District No. <i>106</i>	

TREASURER

Date Appointed <i>5/18/16</i>	
Name <i>Bryan Kracht</i>	
Address <i>1505 Broadway</i>	
City <i>Marysville</i>	Zip Code <i>66508</i>
Home Telephone <i>785-562-6884</i>	Business Telephone

OR CANDIDATE COMMITTEE

Date Appointed	
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, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

5/19/16
(Date)

[Signature]
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS