

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

**RECEIVED**  
AUG 11 2020

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

Name	Richard J. Proehl				
Street	510 Pine Ridge Road				
City	Parsons	County	Labette	Zip Code	67357
Home Telephone	620-421-1804	Business Telephone	620-421-2265		
Office Sought	State Representative		District No.	7	

**TREASURER**

Date Appointed	August 11, 2020				
Name	Linda L. Proehl				
Address	510 Pine Ridge Road				
City	Parsons	Zip Code	67357		
Home Telephone	620-421-1804	Business Telephone	620-423-6664		

**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."

8-11-2020  
(Date)

  
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

**APPOINTMENT OF**

**TREASURER OR CANDIDATE COMMITTEE FOR**

**FOR CANDIDATE FOR STATE OFFICE**

**FILED**

JAN 04 2006

RON THORNBURGH  
SECRETARY OF STATE

**RECEIVED**

DEC 30 2005

Governmental Ethics Commission  
109 WEST 9TH STREET  
TOPEKA, KANSAS 66612

This is an (Check one)

Initial Appointment

Amended Statement

(Please Type or Print)

**CANDIDATE**

Name Richard J Proehl		
Street 510 Pine Ridge Rd		
City Parsons	County Labette	Zip Code 67357
Home Telephone 620-421-1804	Business Telephone 620-421-2265	
Office Sought State Representative	District No. 7	

**TREASURER**

Date Appointed December 27, 2005		
Name Sandy Manners		
Address 24029 Udall Rd		
City Parsons	Zip Code 67357	
Home Telephone 620-421-5490	Business Telephone 620-421-2265	

**OR CANDIDATE COMMITTEE**

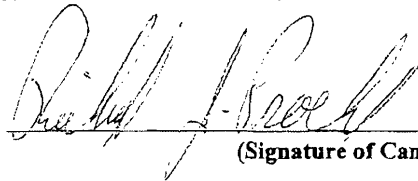
Date Appointed		
Chairperson's Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	
Treasurer's Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	

**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."

12-27-05

(Date)



(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS