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

Governmental Ethics Commission
901 S. Kansas Avenue
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is an (Check one) **Initial Appointment** **Amended Statement**

Candidate Candidate Name: **Timothy B Reed**
Address: **4418 NW 53rd Terr**
Address2:
City: **Topeka** Zip: **66618**
Home Phone: Business Phone: Cell Phone: **(785) 817-9297**
County: **Sheridan** Email Address: **reed.b.tim@gmail.com**
Office Sought: **State Representative** District No.: **50**

Treasurer Date Appointed: **06/01/2020**
Treasurer Name: **Lauren Karlin**
Address: **4418 NW 53rd Terr**
Address2:
City: **Topeka** State: **KS** Zip: **66618**
Home Telephone: Business Phone: Cell Phone: **(785) 633-3092**
Email Address: **laurenMichelle917@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: **7/20/2020 4:53:23 PM** Signature of Candidate: **Timothy B Reed**

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

FILED

JUN 09 2020

**SCOTT SCHWAB
SECRETARY OF STATE**

This is an (Check one) Initial Appointment Amended Statement

CANDIDATE

(Please Type or Print)

Name <u>Timothy Reed</u>			
Street <u>4418 NW 53rd Terr</u>			
City <u>Topeka</u>	County <u>Shawnee</u>	Zip Code <u>66618</u>	
Home Telephone <u>785-817-9297</u>	Business Telephone		
Office Sought <u>House of Representatives</u>	District No. <u>50</u>		

TREASURER

Date Appointed <u>6-1-2020</u>	
Name <u>Lauren Karlin</u>	
Address <u>4418 NW 53rd Terr</u>	
City <u>Topeka</u>	Zip Code <u>66618</u>
Home Telephone <u>785-633-3092</u>	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."

6-1-2020
(Date)


(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS