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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: **Eric L Smith**
Address: **627 Kennebec St**
Address2:
City: **Burlington** Zip: **66839**
Home Phone: Business Phone: Cell Phone: **(620) 490-1458**
County: **Coffey** Email Address: **elsmith4hd76@gmail.com**
Office Sought: **State Representative** District No.: **76**

Treasurer Date Appointed: **05/12/2020**
Treasurer Name: **Rebecca Smith**
Address: **627 Kennebec St.**
Address2:
City: **Burlington** State: **KS** Zip: **66839**
Home Telephone: Business Phone: Cell Phone: **(620) 490-1457**
Email Address: **elsmith4hd76@gmail.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: **5/13/2020 6:56:33 PM** Signature of Candidate: **Eric L. Smith**

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

Candidate Candidate Name: **Eric L Smith**
Address: **627 Kennebec St**
Address2:
City: **Burlington** Zip: **66839**
Home Phone: Business Phone: Cell Phone: **(620) 490-1458**
County: **Coffey** Email Address: **elsmith4hd76@gmail.com**
Office Sought: **State Representative** District No.: **76**

Treasurer Date Appointed: **06/29/2016**
Treasurer Name: **Vickie D Foster**
Address: **426 Saint Lawrence St**
Address2:
City: **Burlington** State: **KS** Zip: **66839**
Home Telephone: Business Phone: Cell Phone: **(620) 490-0507**
Email Address: **elsmith4hd76@gmail.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: **7/19/2016 5:50:33 PM** Signature of Candidate: **Eric L Smith**

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