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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: **Tory M Arnberger**  
Address: **P.O. Box 103**  
Address2:  
City: **Great Bend** Zip: **67530**  
Home Phone: **(620) 617-5194** Business Phone: Cell Phone:  
County: **Barton** Email Address: **tmarnberger@gmail.com**  
Office Sought: **State Representative** District No.: **112**

**Treasurer** Date Appointed: **03/30/2016**  
Treasurer Name: **Kristy Blakeslee**  
Address: **656 W Barton County Rd**  
Address2:  
City: **Great Bend** State: **KS** Zip: **67530**  
Home Telephone: **(620) 786-4064** Business Phone: Cell Phone:  
Email Address: **kristy@straubspowersports.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: **6/16/2020 4:31:09 PM** Signature of Candidate: **Tory Marie Arnberger**

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Home Phone: **(620) 617-5194** Business Phone: Cell Phone:  
County: **Barton** Email Address: **tmarnberger@gmail.com**  
Office Sought: **State Representative** District No.: **112**

**Treasurer** Date Appointed: **03/30/2016**  
Treasurer Name: **Kristy Straub**  
Address: **656 W Barton County Rd**  
Address2:  
City: **Great Bend** State: **KS** Zip: **67530**  
Home Telephone: **(620) 786-4064** Business Phone: Cell Phone:  
Email Address: **kristy@straubint.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: **1/9/2018 4:00:55 PM** Signature of Candidate: **Tory Marie Arnberger**

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