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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: David R Soffer

Address: 8333 W 102 St

Address2:

City: Overland Park Zip: 66212

Home Phone: (917) 747-6305 Business Phone: (917) 747-6305 Cell Phone: (917) 747-6305

County: Johnson Email Address: davidrsoffer@gmail.com

Office Sought: State Representative District No.: 29

Treasurer Date Appointed: 05/31/2022

Treasurer Name: Marjorie Robinow

Address: 10048 Goodman Dr

Address2:

City: Overland Park State: KS Zip: 66212

Home Telephone: (913) 269-0920 Business Phone: Cell Phone:

Email Address: Margierobinow@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: 7/22/2022 12:36:38 AM Signature of Candidate: David Soffer

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APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM

FOR CANDIDATE FOR STATE OFFICE

	NECEIVED
This is an (Check one) Initial Appointment Am	ended Statement MAY 31 2022
CANDIDATE (Please Type or Print)	`````````````````````````````````````
Name David Soffer	KS Governmental Ethics Commissi
Mailing Address 8333 W 102 92 St.	
	p Code 66212
Telephone 417-747-6305 Email david Soffer Fo	
	strict No. 29
TREASURER	
Date Appointed 5/3//22	
Name & Marsorie Robinow	
Mailing Address 10048 Goodman St.	
City Over and Park Zip	Code GG212
Telephone 913 - 269 - 0920 Email Margierobinow &	
	~
OR CANDIDATE COMMITTEE	
Date Appointed	
Chairperson's Name	
Mailing Address	
City Zip C	Code
Telephone Email	
Treasurer's Name	
Mailing Address	
	Code
Telephone Email	
SIGNATURE	
'I declare that this statement has been examined by me and to the best of my knowledge and belief is true,	
rrect and complete. I understand that the intentional failure to file this	
lse document is a class A misdemeanor."	
$\frac{05/31/2a}{}$	91
(Date) (Signatu	ure of Candidate)
SEE REVERSE SIDE FOR INSTRUCTION	ONS Print Page

Governmental Ethics Commission