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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: **Louis R Reed**  
Address: **506 Sand Creek Road**  
Address2:  
City: **Pomona** Zip: **66076**  
Home Phone: Business Phone: Cell Phone: **(785) 241-3794**  
County: **Franklin** Email Address: **reedlr@swbell.net**  
Office Sought: **State Representative** District No.: **59**

**Treasurer** Date Appointed: **06/13/2022**  
Treasurer Name: **Michael Skidmore**  
Address: **P.O. box 900**  
Address2:  
City: **Ottawa** State: **KS** Zip: **66067**  
Home Telephone: Business Phone: **(785) 229-2735** Cell Phone:  
Email Address: **mike.skidmore@gssb.us.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: **6/13/2022 11:41:58 PM** Signature of Candidate: **Louis R. Reed**