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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](http://ethics.kansas.gov)

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

**Candidate** Candidate Name: **David R Baker**

Address: **807 Hockaday Street**

Address2: **PO Box 252**

City: **Council Grove** Zip: **66846**

Home Phone: **(620) 767-2528** Business Phone: Cell Phone: **(620) 767-2528**

County: **Morris** Email Address: **davebaker.kansas@gmail.com**

Office Sought: **State Representative** District No.: **68**

**Treasurer** Date Appointed: **12/09/2021**

Treasurer Name: **Cheerie Baker**

Address: **807 Hockaday Street**

Address2: **PO Box 252**

City: **Council Grove** State: **KS** Zip: **66846**

Home Telephone: **(620) 767-2470** Business Phone: Cell Phone: **(620) 767-2470**

Email Address: **davebaker.kansas@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: **12/9/2021 10:12:13 AM** Signature of Candidate: **David R Baker**

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**Candidate** Candidate Name: **Dave R Baker**  
Address: **P. O. Box 252**  
Address2:  
City: **Council Grove** Zip: **66846**  
Home Phone: Business Phone: Cell Phone: **(620) 767-2528**  
County: **Morris** Email Address: **davebaker.kansas@gmail.com**  
Office Sought: **State Representative** District No.: **68**

**Treasurer** Date Appointed: **01/10/2020**  
Treasurer Name: **Roger Elliott**  
Address: **3310 Merced Drive**  
Address2:  
City: **Manhattan** State: **KS** Zip: **66503**  
Home Telephone: Business Phone: Cell Phone: **(316) 655-2616**  
Email Address: **relliott8@cox.net**

**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: **8/6/2021 9:58:06 AM** Signature of Candidate: **Dave R. Baker**

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