

[Print this form](#) or [Go Back](#)



**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: **Charles M Torres**

Address: **203 Anderson St.**

Address2: **PO Box 264**

City: **Olpe** Zip: **66865**

Home Phone: **(620) 475-3632** Business Phone: Cell Phone: **(620) 481-7515**

County: Email Address: **enfermero@wheatstate.com**

Office Sought: **State Representative** District No.: **76**

Treasurer Date Appointed: **06/07/2022**

Treasurer Name: **Lori Torres**

Address: **203 Anderson St.**

Address2: **PO Box 264**

City: **Olpe** State: **KS** Zip: **66865**

Home Telephone: **(620) 475-3632** Business Phone: Cell Phone: **(620) 481-3481**

Email Address: **enfermero@wheatstate.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: **6/7/2022 2:34:11 PM** Signature of Candidate: **Charles M Torres**