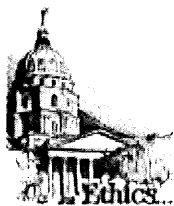


[Print this form](#) or [Go Back](#)



**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: **Chuck Schmidt**
Address: **1922 S. Michelle Court**
Address2:
City: **Wichita** Zip: **67207**
Home Phone: **(620) 330-4576** Business Phone: Cell Phone: **(620) 330-4576**
County: **Sedgwick** Email Address: **cschmidt3131@gmail.com**
Office Sought: **State Representative** District No.: **88**

Treasurer Date Appointed: **07/16/2021**
Treasurer Name: **Rebecca Jenek**
Address: **5520 W. 37th St. S.**
Address2:
City: **Wichita** State: **KS** Zip: **67215**
Home Telephone: **(620) 330-4576** Business Phone: Cell Phone: **(316) 619-5370**
Email Address: **beckiejenek@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: **7/16/2021 8:31:03 PM** Signature of Candidate: **Chuck Schmidt**

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

[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: **Chuck Schmidt**
Address: **1922 S. Michelle Court**
Address2:
City: **Wichita** Zip: **67207**
Home Phone: **(620) 330-4576** Business Phone: Cell Phone: **(620) 330-4576**
County: **Sedgwick** Email Address: **cschmidt3131@gmail.com**
Office Sought: **State Representative** District No.: **88**

Treasurer Date Appointed: **06/21/2021**
Treasurer Name: **Mary Schmidt**
Address: **1922 S. Michelle Court**
Address2:
City: **Wichita** State: **KS** Zip: **67207**
Home Telephone: **(620) 779-1392** Business Phone: Cell Phone: **(620) 779-1392**
Email Address: **meschmidt1001@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: **6/22/2021 8:59:15 AM** Signature of Candidate: **Chuck Schmidt**

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

[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: **Chuck Schmidt**
Address: **1922 S. Michelle Court**
Address2:
City: **Wichita** Zip: **67207**
Home Phone: **(620) 330-4576** Business Phone: Cell Phone: **(620) 330-4576**
County: **Sedgwick** Email Address: **eschmidt3131@gmail.com**
Office Sought: **State Representative** District No.: **88**

Treasurer Date Appointed: **06/21/2021**
Treasurer Name: **Mary Schmidt**
Address: **1922 S. Michelle Court**
Address2:
City: **Wichita** State: **KS** Zip: **67207**
Home Telephone: **(620) 779-1392** Business Phone: Cell Phone: **(620) 779-1392**
Email Address: **eschmidt3131@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: **6/21/2021 3:44:57 PM** Signature of Candidate: **Charles Schmidt**

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