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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: **Robert H Rein Jr**  
Address: **1215 G Rd**  
Address2:  
City: **Larned** Zip: **67550**  
Home Phone: Business Phone: Cell Phone: **(620) 804-2976**  
County: **Pawnee** Email Address: **bobby.rein@gmail.com**  
Office Sought: **State Representative** District No.: **113**

**Treasurer** Date Appointed: **05/24/2022**  
Treasurer Name: **Sarah Johnson**  
Address: **1304 W 7th St**  
Address2:  
City: **Larned** State: **KS** Zip: **67550**  
Home Telephone: Business Phone: Cell Phone: **(620) 285-1225**  
Email Address: **sarah@cpavbv.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: **5/24/2022 5:59:27 PM** Signature of Candidate: **Robert H Rein Jr**

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Address2:  
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