APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR STATE OFFICE OCT 05 2017 KRIS W. KOBACH Amended Statement RETARY OF STATE This is an (Check one) Initial Appointment **CANDIDATE** (Please Type or Print) Name TARunter 1600 G Street Zip Code STilue 1 County City Home Telephone Business Telephone District No. Office Sought **TREASURER** Date Appointed Name Address Zip Code City Home Telephone **Business Telephone** OR CANDIDATE COMMITTEE Date Appointed Chairperson's Name Address City Zip Code Home Telephone **Business Telephone** Treasurer's Name Address City Zip Code Home Telephone **Business Telephone SIGNATURE** "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." (Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

Governmental Ethics Commission

Rev.2000