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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: **Dorothy Goodman**
Address: **2662 X4 Rd**
Address2:
City: **Sabetha** Zip: **66534**
Home Phone: **(785) 285-1977** Business Phone: Cell Phone:
County: **Nemaha** Email Address: **dort@dortgoodman.net**
Office Sought: **State Representative** District No.: **62**

Treasurer

Date Appointed: **05/08/2024**
Treasurer Name: **Mathew Bachtold**
Address: **703 S 12th**
Address2:
City: **Sabetha** State: **KS** Zip: **66534**
Home Telephone: **(785) 285-1385** Business Phone: Cell Phone:
Email Address: **mathew.bachtold@yahoo.com**

**Candidate
Committee**

Date Appointed:
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: **5/8/2024 9:25:16 AM** Signature of Candidate: **Dorothy Goodman**