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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: **Jo Ann Roth**
Address: **314 West 3rd Street**
Address2:
City: **Ellinwood** Zip: **67526**
Home Phone: **(620) 564-2920** Business Phone: **(620) 564-2090** Cell Phone: **(620) 282-4054**
County: Email Address: **joannroth@embarqmail.com**
Office Sought: **State Representative** District No.: **113**

Treasurer

Date Appointed: **06/04/2024**
Treasurer Name: **Kent Roth**
Address: **314 West 3rd Street**
Address2:
City: **Ellinwood** State: **KS** Zip: **67526**
Home Telephone: **(620) 564-2920** Business Phone: **(620) 564-2090** Cell Phone: **(620) 282-4054**
Email Address: **rothlawoffice@embarqmail.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: **6/4/2024 11:10:52 AM** Signature of Candidate: **Jo Ann Roth**