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**Campaign Finance  
Appointment of Treasurer or  
Candidate Committee Form  
For Candidate For State Office**

Governmental Ethics Commission  
109 W. 9th, Suite 504  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
[www.kansas.gov/ethics](http://www.kansas.gov/ethics)

This is an (Check one)  **Initial Appointment**  **Amended Statement**

**Candidate** Candidate Name: **Christopher B Johnston**  
Address: **2902 Nevada Terr.**  
Address2:  
City: **Ottawa** Zip: **66067**  
Home Phone: **(913) 707-2153** Business Phone: Cell Phone: **(913) 707-2153**  
County: **Franklin** Email Address: **bonsaikc@gmail.com**  
Office Sought: **State Senator** District No.: **12**

**Treasurer** Date Appointed: **07/17/2016**  
Treasurer Name: **Rhonda Johnston**  
Address: **2902 Nevada Terr.**  
Address2:  
City: **Ottawa** State: **KS** Zip: **66067**  
Home Telephone: Business Phone: Cell Phone: **(913) 671-8736**  
Email Address: **rjohnston99@aol.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: **7/17/2016 4:13:41 PM** Signature of Candidate: **Rhonda Johnston**

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**Candidate** Candidate Name: **Christopher B Johnston**  
Address: **2902 Nevada Terr.**  
Address2:  
City: **Ottawa** Zip: **66067**  
Home Phone: **(913) 707-2153** Business Phone: Cell Phone: **(913) 707-2153**  
County: **Franklin** Email Address: **chris@johnstonforkansas.org**  
Office Sought: **State Senator** District No.: **12**

**Treasurer** Date Appointed: **04/21/2016**  
Treasurer Name: **James Vibert**  
Address: **1981 Indiana Rd**  
Address2:  
City: **Ottawa** State: **KS** Zip: **66067**  
Home Telephone: **(785) 746-8885** Business Phone: Cell Phone:  
Email Address: **jim@windwalkerboats.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: **6/12/2016 7:11:46 PM** Signature of Candidate: **Christopher Johnston**

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**APPOINTMENT OF  
TREASURER OR CANDIDATE COMMITTEE FORM  
FOR CANDIDATE FOR STATE OFFICE**

**FILED**  
APR 21 2016  
KRIS W. KOBACH  
SECRETARY OF STATE

This is an (Check one)  Initial Appointment  Amended Statement

**CANDIDATE** (Please Type or Print)

Name	CHRISTOPHER B. JOHNSTON		
Street	2902 NEVADA TERR		
City	OTTAWA	County	FRANKLIN Zip Code 66067
Home Telephone	913-707-2153	Business Telephone	913-707-2153
Office Sought	STATE SENATE		District No. 12

**TREASURER**

Date Appointed	4/21/16		
Name	JAMES VIBERT		
Address	1981 INDIANA RD		
City	OTTAWA	Zip Code	66067
Home Telephone	785-746-8885	Business Telephone	

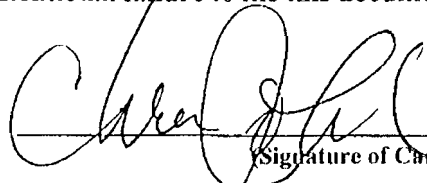
**OR CANDIDATE COMMITTEE**

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."

4/21/16  
(Date)

  
(Signature of Candidate)

**SEE REVERSE SIDE FOR INSTRUCTIONS**