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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: Vail D Fruechting

Address: 1946 N Meridian Ave

Address2:

City: Wichita Zip: 67203-1567

Home Phone: (316) 305-7630 Business Phone: Cell Phone: (316) 315-6642

County: Sedgwick Email Address: vail.senate.25@gmail.com

Office Sought: State Senator District No.: 25

Treasurer Date Appointed: 06/04/2020

Treasurer Name: Pete Hanas Address: 8102 Mockingbird

Address2:

City: Wichita State: KS Zip: 67207-1121

Home Telephone: (316) 684-0544 Business Phone: Cell Phone: (316) 833-1614

Email Address: pkhanas@cox.net

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:

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.

Date: 6/4/2020 6:46:44 AM Signature of Candidate: Vail Fruechting

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## APPOINTMENT OF

## RECEIVED

## TREASURER OR CANDIDATE COMMITTEE FORM JUN 0 8 2020

FOR CANDIDATE FOR STATE OFFICE

	dovernmental Ethics Commission
This is an (Check one) Initial App	pointment Amended Statement
CANDIDATE (Please Type	
Name VAIL FRUECHTING	
Street 1946 N MERIDIAN AVE	
City WICHITA County SG	Zip Code 67203
	ness Telephone 3/6-3/6.6642
Office Sought KS SENATE DISTRICT 25	District No. 25
TREASURER	
Date Appointed 6/3/2020	
Name DETER A HALL	
Address 8/02 E MORNINGSIDE ST	
City WICHITA	Zip Code 67207
	ess Telephone
OR CANDIDATE COMMITTEE  Date Appointed	
Chairperson's Name	
Address	
City	Zip Code
Home Telephone Busine	ss Telephone
Treasurer's Name	
Address	
City	Zip Code
Home Telephone Busines	ss Telephone
SIGNATURE  I declare that this statement has been examined by me and to the best of my knowledge and belief is true, or rect and complete. I understand that the intentional failure to file this document or intentionally filing a lise document is a class A misdemeanor."	
(Date)	(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

**Governmental Ethics Commission** 

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