

[Print this form](#) or [Go Back](#)



**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: **Matthew D Robin**
Address: **607 Pine Street**
Address2:
City: **Wamego** Zip: **66547**
Home Phone: Business Phone: Cell Phone: **(954) 937-5607**
County: **Pottawatomie** Email Address: **mattyrobin8@gmail.com**
Office Sought: **State Senator** District No.: **18**

Treasurer

Date Appointed: **06/14/2024**
Treasurer Name: **Amy Marrotte**
Address: **4797 Ikes Wy**
Address2:
City: **St George** State: **KS** Zip: **66535**
Home Telephone: Business Phone: Cell Phone: **(860) 268-8495**
Email Address: **marrottedubiel@gmail.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: **6/14/2024 1:17:11 PM** Signature of Candidate: **Matthew Robin**

[Print this form](#) or [Go Back](#)