

[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: **J.R. Claeys**
Address: **2157 Redhawk Lane**
Address2:
City: **Salina** Zip: **67401**
Home Phone: Business Phone: Cell Phone: **(785) 250-5758**
County: **Saline** Email Address: **jr@claeys.com**
Office Sought: **State Senator** District No.: **24**

Treasurer Date Appointed: **08/05/2020**
Treasurer Name: **Caitlin Claeys**
Address: **2157 Redhawk Ln**
Address2:
City: **Salina** State: **KS** Zip: **67401**
Home Telephone: Business Phone: Cell Phone:
Email Address: **jr@claeys.com**

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:

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: **8/16/2020 3:08:33 PM** Signature of Candidate: **J.R. Claeys**

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