



**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: **Keenen A Smith**
Address: **731 S Dodge St.**
Address2:
City: **Wichita** Zip: **67213**
Home Phone: **(316) 295-0716** Business Phone: Cell Phone: **(316) 295-0716**
County: **Sedgwick** Email Address: **Keenensmithpro@gmail.com**
Office Sought: **State Senator** District No.: **25**

Treasurer

Date Appointed: **01/10/2024**
Treasurer Name: **Vail Fruechting**
Address: **1946 N Meridian**
Address2:
City: **Wichita** State: **KS** Zip: **67203**
Home Telephone: Business Phone: Cell Phone: **(316) 305-7630**
Email Address: **Vail.Fruechting@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: **1/10/2024 3:58:13 PM** Signature of Candidate: **Keenen smith**