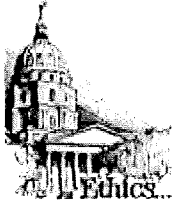


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**Campaign Finance  
Appointment of Treasurer or  
Candidate Committee Form  
For Candidate For State Office**

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

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