

[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: **Richard L Smith**
Address: **412 N Rutland**
Address2:
City: **Wichita** Zip: **67206**
Home Phone: **(316) 652-9348** Business Phone: Cell Phone: **(316) 208-5227**
County: **Sedgwick** Email Address: **srx600cr@gmail.com**
Office Sought: **State Senator** District No.: **30**

Treasurer

Date Appointed: **05/31/2024**
Treasurer Name: **Paul Wolff**
Address: **13021 E Reeds Cove CT**
Address2:
City: **Wichita** State: **KS** Zip: **67230**
Home Telephone: Business Phone: Cell Phone: **(316) 841-1428**
Email Address: **paulwolff617@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: **7/8/2024 3:47:27 PM** Signature of Candidate: **RL Smith**