

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: **Bruce Schultz**  
Address: **38324 Plymouth St**  
Address2:  
City: **Wamego** Zip: **66547**  
Home Phone: Business Phone: Cell Phone: **(785) 313-5174**  
County: **Wabaunsee** Email Address: **schultzforschools@gmail.com**  
Office Sought: **State Board of Education** District No.: **6**

**Treasurer**

Date Appointed: **06/02/2024**  
Treasurer Name: **Katherine Schultz**  
Address: **38324 Plymouth Street**  
Address2:  
City: **Wamego** State: **KS** Zip: **66547**  
Home Telephone: Business Phone: Cell Phone: **(785) 313-5175**  
Email Address: **schultzforschools@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: **7/26/2024 9:02:57 PM** Signature of Candidate: **BDSchultz**

APPOINTMENT OF  
TREASURER OR CANDIDATE COMMITTEE FORM  
FOR CANDIDATE FOR STATE OFFICE

**RECEIVED**  
JUN 14 2024  
SCOTTISH WAB  
SECRETARY OF STATE

This is an (Check one)  Initial Appointment  Amended Statement  
CANDIDATE (Please Type or Print)

Name <u>Bruce Schultz</u>			
Mailing Address <u>38324 Plymouth St</u>			
City <u>Warego</u>	County <u>Wabawsee</u>	Zip Code <u>66547</u>	
Telephone <u>785 313 5174</u>	Email <u>BDSchultzphd@gmail.com</u>		
Office Sought <u>KSDE Board of Education</u>	District No. <u>6</u>		

**TREASURER**

Date Appointed <u>04 June 2024</u>			
Name <u>Katherine T Schultz</u>			
Mailing Address <u>38324 Plymouth St</u>			
City <u>Warego</u>	Zip Code <u>66547</u>		
Telephone <u>785 313 5175</u>	Email <u>bubblcap2@gmail.com</u>		

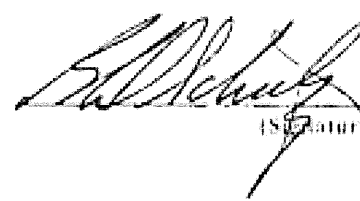
**OR CANDIDATE COMMITTEE**

Date Appointed			
Chairperson's Name			
Mailing Address			
City	Zip Code		
Telephone	Email		
Treasurer's Name			
Mailing Address			
City	Zip Code		
Telephone	Email		

**SIGNATURE**

"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."

04 June 24  
(Date)

  
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS