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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: **Mathew Reinhold**
Address: **11200 Delaware Parkway**
Address2:
City: **Kansas City** Zip: **66109**
Home Phone: Business Phone: Cell Phone: **(913) 306-5394**
County: **Wyandotte** Email Address: **mathewreinhold2022@gmail.com**
Office Sought: **State Representative** District No.: **33**

Treasurer

Date Appointed: **05/29/2024**
Treasurer Name: **Philip Martin**
Address: **210 Lake of the Forest**
Address2:
City: **Bonner Springs** State: **KS** Zip: **66012**
Home Telephone: Business Phone: Cell Phone: **(913) 709-6343**
Email Address: **philmartin210@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: **5/29/2024 5:59:22 PM** Signature of Candidate: **Mathew Reinhold**

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City: **Kansas City** Zip: **66109**
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County: **Wyandotte** Email Address: **mathewreinhold2022@gmail.com**
Office Sought: **State Representative** District No.: **33**

Treasurer Date Appointed: **06/09/2022**
Treasurer Name: **Skye Brown**
Address: **2048 S 137th Street**
Address2:
City: **Bonner** State: **KS** Zip: **66012**
Home Telephone: Business Phone: Cell Phone: **(913) 562-7464**
Email Address: **skyyebrown6@gmail.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: **6/14/2022 10:02:27 AM** Signature of Candidate: **Mathew Reinhold**