

**APPOINTMENT OF  
TREASURER OR CANDIDATE COMMITTEE FORM  
FOR CANDIDATE FOR LOCAL OFFICE**

This is an (Check one)

Initial Appointment

Amended Statement

**CANDIDATE**

(Please Type or Print)

Name <i>Bob Voegelé</i>		
Street <i>29432 21st Rd</i>		
City <i>Arkansas City</i>	County <i>Cowley</i>	Zip Code <i>67005</i>
Home Telephone <i>620-446-1660</i>	Business Telephone	
Office Sought <i>Commissioner</i>	District No. <i>2</i>	

**TREASURER**

Date Appointed <i>Jan 1 - 2024</i>		
Name <i>Jay Warren</i>		
Address <i>P.O. Box 902</i>		
City <i>Arkansas City, KS</i>	Zip Code <i>67005</i>	
Home Telephone <i>785-230-5685</i>	Business Telephone	

**OR CANDIDATE COMMITTEE**

Date Appointed		
Chairperson's Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	
Treasurer's Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	

**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."

1-2-24  
(Date)

Bob Voegelé  
(Signature of Candidate)

**SEE REVERSE SIDE FOR INSTRUCTIONS**