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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
Topcka, 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: **Dakota Loomis**
Address: **2000 Crossgate Drive**
Address2:
City: **Lawrence** Zip: **66047**
Home Phone: **(785) 979-6345** Business Phone: Cell Phone:
County: **Douglas** Email Address: **info@loomis4da.com**
Office Sought: **District Attorney** District No.: **7**

Treasurer

Date Appointed: **04/17/2024**
Treasurer Name: **Katherine Winter**
Address: **1512 New Hampshire Street**
Address2:
City: **Lawrence** State: **KS** Zip: **66044**
Home Telephone: Business Phone: Cell Phone: **(785) 550-0743**
Email Address: **katiekwinter@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: **4/26/2024 12:16:00 PM** Signature of Candidate: **Dakota Loomis**