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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is an (Check one) ☐ Initial Appointment ☒ Amended Statement

Candidate

Candidate Name: **Sean Tevis**
Address: **500 E Cedar ST**
City: **Olathe** Zip: **66061**
Home Phone: Business Phone: Cell Phone: **9132319555**
County: **Johnson** Email Address: **sean@seantevis.com**
Office Sought: **State Representative** District No.: **15**

Treasurer

Date Appointed: **01/09/2009**
Treasurer Name: **Michelle Tevis**
Address: **500 E Cedar ST**
City: **Olathe** State: **KS** Zip: **66061**
Home Telephone: **9137092042** Business Phone: Cell Phone:
Email Address: **mtevis@gmail.com**

**Candidate
Committee**

Date Appointed:
Chairperson's Name:
Address:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

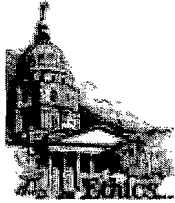
I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **1/11/2009 10:26:59 PM** Signature of Candidate: **Sean Tevis**

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Candidate

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Address: **500 E Cedar ST**
City: **Olathe** State: Zip: **66061**
Home Phone: Business Phone: Cell Phone: **9132319555**
County: **Johnson** Email Address: **sean@seantevis.com**
Office Sought: **State Representative** District No.: **15**

Treasurer

Date Appointed: **06/18/2008**
Treasurer Name: **Andria Berg**
Address: **6885 W 51 TER**
City: **Mission** State: **KS** Zip: **66202**
Home Telephone: **9134614426** Business Phone: Cell Phone:
Email Address: **andria_rockwell@hotmail.com**

**Candidate
Committee**

Date Appointed:
Chairperson's Name:
Address:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
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: **6/19/2008 4:31:28 PM** Signature of Candidate: **Sean Tevis**

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