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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](http://www.kansas.gov/ethics)

This is an (Check one)  Initial Appointment  Amended Statement

**Candidate**

Candidate Name: **Stephanie Sawyer Clayton**  
Address: **9825 Woodson**  
Address2:  
City: **Overland Park** Zip: **66207**  
Home Phone: **(913) 642-5673** Business Phone: Cell Phone:  
County: **Johnson** Email Address: **stephaniesawyerclayton@gmail.com**  
Office Sought: **State Representative** District No.: **20**

**Treasurer**

Date Appointed: **03/09/2010**  
Treasurer Name: **Jennifer Estes**  
Address: **9209 W. 48th Ter**  
Address2:  
City: **Merriam** State: **KS** Zip: **66203**  
Home Telephone: **(913) 766-5699** Business Phone: Cell Phone:  
Email Address: **jennifer.estes0@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:  
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: **9/17/2010 4:30:16 PM** Signature of Candidate: **Stephanie Sawyer Clayton**

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**Candidate**

Candidate Name: **Stephanie Sawyer Clayton**  
Address: **9825 Woodson**  
Address2:  
City: **Overland Park** Zip: **66207**  
Home Phone: **(913) 642-5673** Business Phone: Cell Phone:  
County: **Johnson** Email Address: **stephaniesawyerclayton@gmail.com**  
Office Sought: **State Representative** District No.: **20**

**Treasurer**

Date Appointed: **03/09/2010**  
Treasurer Name: **Jennifer Estes**  
Address: **9209 W. 48th St.**  
Address2:  
City: **Merriam** State: **KS** Zip: **66203**  
Home Telephone: **(913) 766-5699** Business Phone: Cell Phone:  
Email Address: **jennifer.estes0@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:  
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: **7/24/2010 9:47:27 AM** Signature of Candidate: **Stephanie Sawyer Clayton**[Print this form](#) or [Go Back](#)

APPOINTMENT OF

RECEIVED

TREASURER OR CANDIDATE COMMITTEE FORM

MAR 10 2010

FOR CANDIDATE FOR STATE OFFICE

This is an (Check one)

Initial Appointment

(Please Type or Print)

Amended Statement

CANDIDATE

Name	Stephanie Sawyer Clark		
Street	9825 Woodson Dr		
City	Overland Park	County	Johnson
		Zip Code	66207
Home Telephone	913-642-5673	Business Telephone	913-265-4970
Office Sought	State Representative		District No. 20

TREASURER

Date Appointed	3-9-10		
Name	Jennifer Tetz		
Address	9209 W 48th Terr		
City	Merriam	Zip Code	66203
Home Telephone	913-766-5699	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."

3-9-10

(Date)

*[Handwritten Signature]*

(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS