

[Print this form](#) or [Go Back](#)



**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: **Shawn Shipp**
Address: **10830 Rowland CT**
City: **Kansas City** Zip: **66109**
Home Phone: **9317882061** Business Phone: Cell Phone: **9133149173**
County: **Wyandotte** Email Address: **sshipp@peoplepc.com**
Office Sought: **State Representative** District No.: **36**

Treasurer

Date Appointed: **01/03/2005**
Treasurer Name: **Shawn Shipp**
Address: **10830 Rowland CT**
City: **Kansas City** State: **KS** Zip: **66109**
Home Telephone: **9137882061** Business Phone: Cell Phone: **9133149173**
Email Address: **sshipp@peoplepc.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: **1/6/2010 12:51:41 PM** Signature of Candidate: **Shawn A. Shipp**

[Print this form](#) or [Go Back](#)