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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

Candidate

This is an (Check one) Initial Appointment Amended Statement

Candidate Name: Brandon Whipple

Address: 2925 S Walnut St

Address2:

City: Wichita Zip: 67217

Home Phone: (316) 290-9447 Business Phone: Cell Phone:

County: Sedgwick Email Address: brandon@whippleforkansas.com

Office Sought: State Representative District No.: 96

**Treasurer** 

Date Appointed: 10/06/2009

Treasurer Name: Chelsea Whipple

Address: 2925 S Walnut St

Address2:

City: Wichita State: KS Zip: 67217

Home Telephone: (316) 243-2748 Business Phone: Cell Phone:

Email Address: chelsea.whipple@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: 7/27/2012 10:57:03 PM Signature of Candidate: Brandon Whipple

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## APPOINTMENT OF

RECEIVED

FOR CANDIDATE FOR STATE OFFICE REGION OF THE PROPERTY OF THE P TREASURER OR CANDIDATE COMMITTEE FORM This is an (Check one) **CANDIDATE** (Please Type or Print) Name Brandon J. Whipple Street 2925 S. Walnut County Do Zip Code 67217 City Wichita Business Telephone Home Telephone 316.529.7121 Office Sought Kansas State House District No. 98 TREASURER October 6ths, 2009 Date Appointed Chelsea M. Whipple Name Address 2925 S. Walnut City Wichita Zip Code 67217 Home Telephone 316.529.7121 Business Telephone 316.993.4672 OR CANDIDATE COMMITTEE Date Appointed Chairperson's Name Address Zip Code City Home Telephone **Business Telephone** Treasurer's Name Address City Zip Code **Business Telephone** Home 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." October 6th, 2009

(Date)

SEE REVERSE SIDE FOR INSTRUCTIONS

(Signature of Candidate)

Governmental Ethics Commission

Rev.2000