

[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: **Andrew C Lawson**
Address: **1020 N. Fourth St.**
Address2:
City: **Arkansas City** Zip: **67005-1626**
Home Phone: **(620) 660-1430** Business Phone: **(620) 660-1430** Cell Phone: **(620) 660-1430**
County: **Cowley** Email Address: **lawson.andrew.c@gmail.com**
Office Sought: **State Representative** District No.: **80**

Treasurer Date Appointed: **10/27/2014**
Treasurer Name: **Amy Lawson**
Address: **9233 264th Road**
Address2:
City: **Arkansas City** State: **KS** Zip: **67005**
Home Telephone: **(620) 442-6169** Business Phone: Cell Phone: **(620) 441-1078**
Email Address: **ajolawson@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: **10/27/2014 12:00:41 AM** Signature of Candidate: **Andrew C. Lawson**

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