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

Governmental Ethics Commission 901 S. Kansas Avenue Topeka, KS 66612 Phone (785) 296-4219 Fax (785) 296-2548 ethics.kansas.gov

This is an (Check one) Initial Appointment Amended Statement

Candidate Candidate Name: Lindsay C Vaughn

Address: 8227 Santa Fe Dr.

Address2: Apt 7

City: Overland Park Zip: 66204

Home Phone: Business Phone: Cell Phone: (913) 523-6280

County: Johnson Email Address: lindsayforkansashouse@gmail.com

Office Sought: State Representative District No.: 22

Treasurer Date Appointed:

Treasurer Name:

Address: Address2:

City: State: Zip:

Home Telephone: Business Phone: Cell Phone:

Email Address:

Candidate Date Appointed: 03/31/2020

Committee Chairperson's Name: Lindsay Vaughn

Address: 8227 Santa Fe Dr.

Address2: Apt 7

City: Overland Park State: KS Zip: 66204

Home Telephone: Business Phone: Cell Phone: (913) 523-6280

Email Address: lindsayforkansashouse@gmail.com

Date Appointed: 03/31/2020 Treasurer's Name: Nancy Lusk Address: 7700 W. 83rd St

Address2:

City: Overland Park State: KS Zip: 66204

Home Telephone: (913) 648-2616 Business Phone: Cell Phone:

Email Address: nancyluskforkansas@gmail.com

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: 7/21/2020 2:13:37 PM Signature of Candidate: Lindsay Vaughn

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APPOINTMENT OF



TREASURER OR CANDIDATE COMMITTEE FORM

FOR CANDIDATE FOR STATE OFFICE

KS Governmental Ethics Commission

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TOO MORE Initial Appointment Amended Statement This is an (Check one) CANDIDATE (Please Type or Print) Street Zip Code 66 20 County TOMMON **Business Telephone** Home Telephone Q12 District No. Office Sought Styl TREASURER **Date Appointed** Name Zip Code **Business Telephone** Home Telephone 9/3 OR CANDIDATE COMMITTEE **Date Appointed** Chairperson's Name Address Zip Code City **Business Telephone** Home Telephone Treasurer's Name Address Zip Code City **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." (Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

Governmental Ethics Commission

Rev.2000