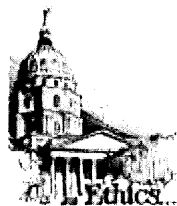


[Print this form](#) or [Go Back](#)



**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: **Stephanie Yeager**
Address: **4480 S Meridian**
Address2: **94**
City: **Wichita** Zip: **67217**
Home Phone: **(316) 708-6116** Business Phone: Cell Phone: **(316) 708-6116**
County: **Sedgwick** Email Address: **stephanie@ygrconsulting.com**
Office Sought: **State Representative** District No.: **96**

Treasurer Date Appointed: **11/16/2019**
Treasurer Name: **Renee Leithoff**
Address: **311 West 16th Street**
Address2:
City: **Newton** State: **KS** Zip: **67114**
Home Telephone: Business Phone: Cell Phone: **(316) 883-9778**
Email Address: **renee.leithoff@yahoo.com**

Candidate Date Appointed:
Committee Chairperson's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
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: **11/10/2021 12:11:30 PM** Signature of Candidate: **Stephanie Yeager**

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

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



**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: **Stephanie Yeager**
Address: **4480 S Meridian**
Address2: **94**
City: **Wichita** Zip: **67217**
Home Phone: **(316) 708-6116** Business Phone: Cell Phone: **(316) 708-6116**
County: **Sedgwick** Email Address: **stephanie@DigitalTwist.org**
Office Sought: **State Representative** District No.: **96**

Treasurer Date Appointed: **11/16/2019**
Treasurer Name: **Renee Leithoff**
Address: **311 West 16th Street**
Address2:
City: **Newton** State: **KS** Zip: **67114**
Home Telephone: Business Phone: Cell Phone: **(316) 883-9778**
Email Address: **renee.leithoff@yahoo.com**

Candidate Date Appointed:
Committee Chairperson's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
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: **11/16/2019 8:43:51 PM** Signature of Candidate: **Stephanie Yeager**

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