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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](http://ethics.kansas.gov)

This is an (Check one) ☐ Initial Appointment ☒ Amended Statement

**Candidate** Candidate Name: **Tim C Hodge**

Address: **2727 N. Main**

Address2:

City: **North Newton** Zip: **67117**

Home Phone: **(316) 772-0744** Business Phone: **(316) 283-8746** Cell Phone:

County: **Harvey** Email Address: **[hodgeforkansas@gmail.com](mailto:hodgeforkansas@gmail.com)**

Office Sought: **State Representative** District No.: **72**

**Treasurer** Date Appointed: **06/26/2020**

Treasurer Name: **Christie Schunn-Sebes**

Address: **7 Emerald Court**

Address2:

City: **North Newton** State: **KS** Zip: **67117**

Home Telephone: **(316) 772-6926** Business Phone: Cell Phone:

Email Address: **[cschunn.cs@gmail.com](mailto:cschunn.cs@gmail.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: **6/26/2020 12:41:48 PM** Signature of Candidate: **Tim Hodge**

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