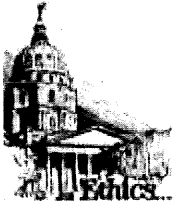


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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

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: **Allie Gregg**
Address: **802 W 18th ST APT 516B**
Address2:
City: **Fort Scott** Zip: **66701**
Home Phone: Business Phone: Cell Phone: **(620) 945-1810**
County: **Bourbon** Email Address: **alliejadel05@gmail.com**
Office Sought: **State Representative** District No.: **4**

Treasurer

Date Appointed: **10/24/2024**
Treasurer Name: **Melinda Lavon**
Address: **539 Ohio ST**
Address2:
City: **Lawrence** State: **KS** Zip: **66044**
Home Telephone: **(785) 979-2477** Business Phone: Cell Phone:
Email Address: **melindalavon0107@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:
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: **10/24/2024 4:04:55 PM** Signature of Candidate: **Allie Gregg**

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