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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: **Christina Haswood**
Address: **PO Box 3083**
Address2:
City: **Lawrence** Zip: **66046**
Home Phone: **(785) 766-4654** Business Phone: Cell Phone:
County: **Douglas** Email Address: **christina@haswoodforkansas.com**
Office Sought: **State Representative** District No.: **10**

Treasurer Date Appointed: **12/22/2021**
Treasurer Name: **Sami Turner**
Address: **PO Box 3083**
Address2:
City: **Lawrence** State: **KS** Zip: **66046**
Home Telephone: Business Phone: Cell Phone: **(785) 424-4561**
Email Address: **samiturner01@gmail.com**

Candidate Date Appointed: **04/18/2021**
Committee Chairperson's Name: **Christina Haswood**
Address: **1942 Stewart Ave. Apt. F15**
Address2:
City: **Lawrence** State: **KS** Zip: **66046**
Home Telephone: **(785) 766-4654** Business Phone: Cell Phone:
Email Address: **christina@haswoodforkansas.com**

Date Appointed: **04/18/2021**
Treasurer's Name: **Andrew Lee**
Address: **2333 Ridge Ct. Apt. 6**
Address2:
City: **Lawrence** State: **KS** Zip: **66046**
Home Telephone: **(913) 905-9600** Business Phone: Cell Phone:
Email Address: **andrewlee917@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: **12/22/2021 4:22:44 PM** Signature of Candidate: **Christina Haswood**

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