



**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: **Suzanne Wikle**  
Address: **1621 New Hampshire St**  
Address2:  
City: **Lawrence** Zip: **66044**  
Home Phone:    Business Phone:    Cell Phone: **(785) 554-1830**  
County: **Douglas**    Email Address: **Suzanne4ks@gmail.com**  
Office Sought: **State Representative**    District No.: **10**

**Treasurer**

Date Appointed: **12/18/2023**  
Treasurer Name: **Rebekah Gaston**  
Address: **845 Missouri Street**  
Address2:  
City: **Lawrence**    State: **KS**    Zip: **66044**  
Home Telephone:    Business Phone:    Cell Phone: **(785) 979-7395**  
Email Address: **rebekahgaston@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: **12/18/2023 2:03:16 PM**    Signature of Candidate: **Suzanne Wikle**