

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



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

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

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

Candidate Candidate Name: **Sam Brownback**
Address: **PO Box 3739**
Address2:
City: **Topeka** Zip: **66611**
Home Phone: **(785) 296-3636** Business Phone: Cell Phone:
County: **Shawnee** Email Address: **tctla@cox.net**
Office Sought: **Governor** District No.:

Treasurer Date Appointed: **11/20/2012**
Treasurer Name: **T L Anderson**
Address: **2334 SW Mayfair Place**
Address2:
City: **Topeka** State: **KS** Zip: **66611**
Home Telephone: **(785) 272-5850** Business Phone: Cell Phone:
Email Address: **tctla@cox.net**

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:
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: **1/11/2016 11:48:40 AM** Signature of Candidate: **Sam Brownback**

[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
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is an (Check one) **Initial Appointment** **Amended Statement**

Candidate

Candidate Name: **Sam Brownback**
Address: **1 SW Cedar Crest Road**
Address2:
City: **Topeka** Zip: **66606**
Home Phone: **(785) 296-3636** Business Phone: Cell Phone:
County: **Shawnee** Email Address: **tctla@cox.net**
Office Sought: **Governor** District No.:

Treasurer

Date Appointed: **11/20/2012**
Treasurer Name: **T L Anderson**
Address: **2334 SW Mayfair Place**
Address2:
City: **Topeka** State: **KS** Zip: **66611**
Home Telephone: **(785) 272-5850** Business Phone: Cell Phone:
Email Address: **tctla@cox.net**

**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:
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: **1/29/2013 3:11:26 PM** Signature of Candidate: **Sam Brownback**

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