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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: **Kris W Kobach**
Address: **P.O. Box 3496**
Address2:
City: **Salina** Zip: **67401**
Home Phone: **(913) 735-4762** Business Phone: Cell Phone:
County: Email Address: **kris@kriskobach.com**
Office Sought: **Attorney General** District No.:

Treasurer Date Appointed: **04/29/2021**
Treasurer Name: **Laura Tawater**
Address: **212 King Street**
Address2:
City: **Dodge City** State: **KS** Zip: **67801**
Home Telephone: **(620) 430-7767** Business Phone: Cell Phone:
Email Address: **lauratawater@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: **4/28/2021 9:57:09 PM** Signature of Candidate: **Kris W. Kobach**

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