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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: **Laura Kelly**
Address: **PO Box 2098**
Address2:
City: **Topeka** Zip: **66601**
Home Phone: **(785) 357-5304** Business Phone: Cell Phone:
County: **Shawnee** Email Address: **laura@laurakelly.org**
Office Sought: **Governor** District No.:

Treasurer Date Appointed:
Treasurer Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Candidate Date Appointed: **05/30/2018**
Committee Chairperson's Name: **Laura Kelly**
Address: **PO Box 2098**
Address2:
City: **Topeka** State: **KS** Zip: **66601**
Home Telephone: Business Phone: **(785) 430-6281** Cell Phone:
Email Address: **info@laurakellyforkansas.com**

Date Appointed: **05/30/2018**
Treasurer's Name: **Kevin McWhorter**
Address: **PO Box 2098**
Address2:
City: **Topeka** State: **KS** Zip: **66601**
Home Telephone: Business Phone: **(785) 430-6281** Cell Phone:

Email Address: **kevinmcwhorter@yahoo.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: **3/7/2022 1:31:04 PM** Signature of Candidate: **Laura Kelly**