

APPOINTMENT OF TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR STATE OFFICE

RECEIVED
JAN 18 2012

This is an (Check one) Initial Appointment Amended Statement
(Please Type or Print)

CANDIDATE

| | | |
|----------------|-------------------------------------|---------------------------------|
| Name | Jerome Gorman | |
| Street | 11425 Georgia Avenue | |
| City | County Wyandotte | Zip Code 66109 |
| Home Telephone | 913-721-1559 | Business Telephone 913-573-2851 |
| Office Sought | District Attorney District No. 29th | |

TREASURER

| | | |
|----------------|----------------------|--------------------|
| Date Appointed | January 17, 2012 | |
| Name | Eugenia Winkelbauer | |
| Address | 4812 N. 107th Street | |
| City | Kansas City | Zip Code 66109 |
| Home Telephone | 913-721-2431 | Business Telephone |

OR CANDIDATE COMMITTEE

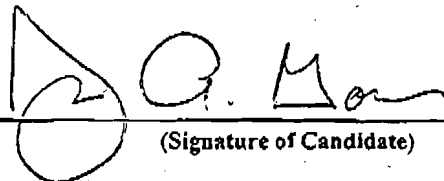
| | | |
|--------------------|--|--------------------|
| Date Appointed | | |
| Chairperson's Name | | |
| Address | | |
| City | | Zip Code |
| Home Telephone | | Business Telephone |
| Treasurer's Name | | |
| Address | | |
| City | | Zip Code |
| Home Telephone | | Business Telephone |

SIGNATURE

"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."

01/17/12

(Date)



(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

**APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM
FOR CANDIDATE FOR STATE OFFICE**

FILED
OCT 15 2003
RON THORNBURGH
SECRETARY OF STATE

This is an (Check one) Initial Appointment Amended Statement
(Please Type or Print)

CANDIDATE

| | | | |
|----------------|----------------------|--------------------|-------------------------------|
| Name | JEROME GORMAN | | |
| Street | 11425 GEORGIA AVENUE | | |
| City | KANSAS CITY | County | WYANDOTTE Zip Code 66109 |
| Home Telephone | 913-721-1559 | Business Telephone | 913-573-2851 |
| Office Sought | DISTRICT ATTORNEY | | District No. 29 th |

TREASURER

| | | | |
|----------------|--------------------------------|--------------------|-------|
| Date Appointed | OCTOBER 8, 2003 | | |
| Name | STEPHEN MAURIN | | |
| Address | 430 N. 17 th STREET | | |
| City | KANSAS CITY | Zip Code | 66102 |
| Home Telephone | 913-371-8215 | Business Telephone | |

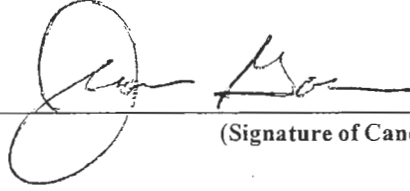
OR CANDIDATE COMMITTEE

| | | | |
|--------------------|--|--------------------|--|
| Date Appointed | | | |
| Chairperson's Name | | | |
| Address | | | |
| City | | Zip Code | |
| Home Telephone | | Business Telephone | |
| Treasurer's Name | | | |
| Address | | | |
| City | | Zip Code | |
| Home Telephone | | Business Telephone | |

SIGNATURE

"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."

10-15-03
(Date)


(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS