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**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: **Steve Roberts**
Address: **6017 West 124 Terrace**
Address2:
City: **Overland Park** Zip: **66209-2779**
Home Phone: **(913) 469-1894** Business Phone: Cell Phone: **(913) 302-8185**
County: **Johnson** Email Address: **mrxmath@gmail.com**
Office Sought: **State Board of Education** District No.: **2**

Treasurer

Date Appointed: **02/14/2011**
Treasurer Name: **MaryPat Sullivan**
Address: **6017 West 124 Terrace**
Address2:
City: **Overland Park** State: **KS** Zip: **66209-2779**
Home Telephone: **(913) 469-1894** Business Phone: **(816) 679-2345** Cell Phone: **(913) 707-3492**
Email Address: **mpsullivan43@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:
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: **7/27/2012 11:08:56 AM** Signature of Candidate: **Steve E Roberts**

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Candidate Candidate Name: **Steve Roberts**
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Home Phone: **(913) 469-1894** Business Phone: Cell Phone: **(913) 302-8185**
County: **Johnson** Email Address: **mrmath@gmail.com**
Office Sought: **State Board of Education** District No.: **2**

Treasurer Date Appointed: **02/14/2011**
Treasurer Name: **MaryPat Sullivan**
Address: **6017 West 124 Terrace**
Address2:
City: **Overland Park** State: **KS** Zip: **66209-2779**
Home Telephone: **(913) 469-1894** Business Phone: **(816) 679-2345** Cell Phone: **(913) 707-3492**
Email Address: **mpsullivan43@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:
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: **1/6/2012 2:22:36 PM** Signature of Candidate: **Steve E. Roberts**

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APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM

FOR CANDIDATE FOR STATE OFFICE

FILED

MAY 06 2008

RON THORNBURGH
SECRETARY OF STATE

CANDIDATE

State (Check one)

Initial Appointment

Amended Statement

(Please Type or Print)

Name	STEVE E. ROBERTS		
Street	6017 WEST 124 TH TERRACE		
City	OVERLAND PARK	County	JOHNSON Zip Code 66209
Home Telephone	913-469-1894	Business Telephone	816-721-3670
Office Sought	STATE SCHOOL BOARD		District No. 2

TREASURER

Date Appointed	MAY 6, 2008, A.D.		
Name	SHARON S KHOURY		
Address	11912 PAWNEE LANE		
City	LEAWOOD, KS	Zip Code	66209
Home Telephone	913-339-6401	Business Telephone	913-636-6402

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."

May 6, 2008
(Date)

Steve E. Roberts
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS