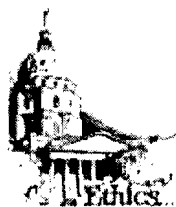


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**Campaign Finance  
Appointment of Treasurer or  
Candidate Committee Form  
For Candidate For State Office**

Governmental Ethics Commission  
109 W. 9th, Suite 504  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
[www.kansas.gov/ethics](http://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: **mrxmlath@gmail.com**  
Office Sought: **State Board of Education** District No.: **2**

**Treasurer** Date Appointed: **03/12/2016**  
Treasurer Name: **Miguel Cartagena**  
Address: **8903 W 132nd Pl**  
Address2:  
City: **Overland Park** State: **KS** Zip: **66213**  
Home Telephone: **(913) 626-5038** Business Phone: **(913) 626-5038** Cell Phone: **(913) 626-5038**  
Email Address: **miguel@recsolutions.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:  
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: **3/13/2016 2:03:45 PM** Signature of Candidate: **Steve E. Roberts**

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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: **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: **7/27/2012 11:08:56 AM** Signature of Candidate: **Steve E Roberts**

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