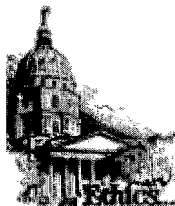


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**Campaign Finance  
Appointment of Treasurer or  
Candidate Committee Form  
For Candidate For State Office**

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: **Jill Quigley**  
Address: **13112 W 84th ST**  
City: **Lenexa** State: Zip: **66215**  
Home Phone: **9135419645** Business Phone: Cell Phone: **9134814603**  
County: **Johnson** Email Address: **jill@jillquigley.com**  
Office Sought: **State Representative** District No.: **17**

**Treasurer**

Date Appointed: **07/02/2007**  
Treasurer Name: **Stephanie Sharp**  
Address: **PO Box 19556**  
City: **Lenexa** State: **KS** Zip: **66215**  
Home Telephone: Business Phone: Cell Phone:  
Email Address: **vote@stephaniesharp.com**

**Candidate  
Committee**

Date Appointed:  
Chairperson's Name:  
Address:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:  
Email Address:

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

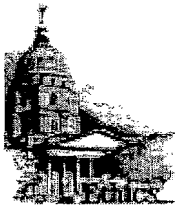
**I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.**

Executed on:

Date: **5/12/2008 7:35:10 PM** Signature of Candidate: **Jill Quigley**

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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: **Jill Quigley**  
 Address: **13112 W 84th ST**  
 City: **Lenexa** State: Zip: **66215**  
 Home Phone: **9135419645** Business Phone: Cell Phone: **9134814603**  
 County: **Johnson** Email Address: **jill@jillquigley.com**  
 Office Sought: **State Representative** District No.: **17**

**Treasurer**

Date Appointed: **07/02/2007**  
 Treasurer Name: **Stephanie Sharp**  
 Address: **PO Box 19556**  
 City: **Lenexa** State: **KS** Zip: **66215**  
 Home Telephone: Business Phone: Cell Phone:  
 Email Address: **ssharp@CACU.com**

**Candidate  
Committee**

Date Appointed:  
 Chairperson's Name:  
 Address:  
 City: State: Zip:  
 Home Telephone: Business Phone: Cell Phone:  
 Date Appointed:  
 Treasurer's Name:  
 Address:  
 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: **5/9/2008 1:37:46 PM** Signature of Candidate: **Jill Quigley**

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

**RECEIVED**

JUL - 2 2007

This is an (Check one)



Initial Appointment



Amended Statement

Governmental Ethics Commission  
109 WEST 9TH STREET  
TOPEKA, KANSAS 66612**CANDIDATE**

(Please Type or Print)

|   |                       |                        |
|---|-----------------------|------------------------|
| Name <b>Jill Quigley</b>                  |                       |                        |
| Street <b>13112 W. 84th Street</b>        |                       |                        |
| City <b>Lenexa</b>                        | County <b>Johnson</b> | Zip Code <b>66215</b>  |
| Home Telephone <b>913-541-9645</b>        |                       | Business Telephone     |
| Office Sought <b>State Representative</b> |                       | District No. <b>17</b> |

**TREASURER**

|                                    |                       |
|------------------------------------|-----------------------|
| Date Appointed <b>7-2-07</b>       |                       |
| Name <b>Stephanie Sharp</b>        |                       |
| Address <b>PO Box 19556</b>        |                       |
| City <b>Lenexa</b>                 | Zip Code <b>66285</b> |
| Home Telephone <b>913-894-1201</b> |                       |
| Business Telephone                 |                       |

**OR CANDIDATE COMMITTEE**

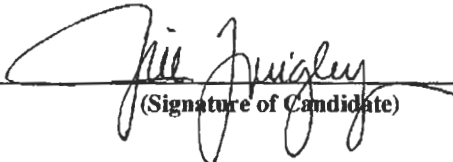
|                    |          |
|--------------------|----------|
| Date Appointed     |          |
| Chairperson's Name |          |
| Address            |          |
| City               | Zip Code |
| Home Telephone     |          |
| Business Telephone |          |
| Treasurer's Name   |      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

7-2-07

(Date)

  
(Signature of Candidate)**SEE REVERSE SIDE FOR INSTRUCTIONS**