

**FILED**

JUL 19 2007

RON THORNBURGH  
SECRETARY OF STATE**APPOINTMENT OF****TREASURER OR CANDIDATE COMMITTEE FORM****FOR CANDIDATE FOR STATE OFFICE**

This is an (Check one)

☐

Initial Appointment

☒

Amended Statement

**CANDIDATE**

(Please Type or Print)

Name <b>Raymond F. Merrick</b>		
Street <b>6874 W. 164 Terrace</b>		
City <b>Stilwell</b>	County <b>Johnson</b>	Zip Code <b>66085</b>
Home Telephone <b>913-897-4014</b>	Business Telephone <b>913-897-4014</b>	
Office Sought <b>State Representative</b>	District No. <b>27</b>	

**TREASURER**

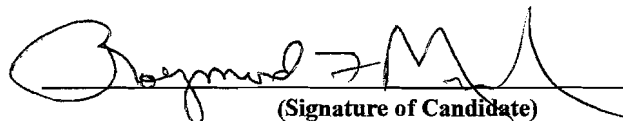
Date Appointed <b>7-17-07</b>		
Name <b>Phyllis J. Merrick</b>		
Address <b>6874 W. 164 Terrace</b>		
City <b>Stilwell</b>	Zip Code <b>66085</b>	
Home Telephone <b>913-897-4014</b>	Business Telephone <b>913-897-4014</b>	

**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."

7/17/2007  
(Date)  
(Signature of Candidate)**SEE REVERSE SIDE FOR INSTRUCTIONS**

**FILED**

## APPOINTMENT OF

## TREASURER OR CANDIDATE COMMITTEE FORM

APR 17 '00

## FOR CANDIDATE FOR STATE OFFICE

RON THORNBURGH  
SECRETARY OF STATE

This is an (Check one)

☒

Initial Appointment

☐ Amended Statement

## CANDIDATE

(Please Type or Print)

Name	RAY MERRICK		
Street	6874 WEST 16TH +en		
City	Stilwell	County	Johnson
		Zip Code	66085
Home Telephone	(913) 897 4014	Business Telephone	( )
Office Sought	REPRESENTATIVE		District No. 27 <sup>th</sup>

## TREASURER

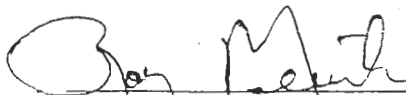
Date Appointed	4/13/2000		
Name	BARBARA LARISON		
Address	9524 WALMER	Zip Code	66212
City	OVERLAND PARK, KANSAS		
Home Telephone	(913) 649-6957	Business Telephone	( )

## OR CANDIDATE COMMITTEE

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

4/13/2000  
(Date)  
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS