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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: **TerriLois Gregory**
Address: **324 Dearborn**
Address2:
City: **Baldwin City** Zip: **66006-0105**
Home Phone: **(785) 222-0445** Business Phone: **(785) 296-7646** Cell Phone: **(785) 222-0445**
County: **Douglas** Email Address: **RepTLG@gmail.com**
Office Sought: **State Representative** District No.: **10**

Treasurer

Date Appointed: **10/17/2011**
Treasurer Name: **TerriLois Gregory**
Address: **Box 105**
Address2:
City: **Baldwin City** State: **KS** Zip: **66006-0105**
Home Telephone: **(785) 222-0445** Business Phone: **(785) 296-7646** Cell Phone: **(785) 222-0445**
Email Address: **RepTLG@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:

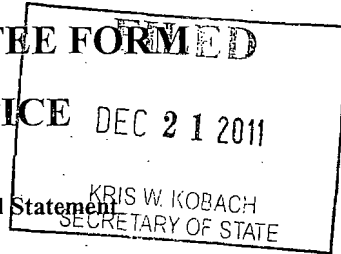
I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **1/10/2012 2:21:43 PM** Signature of Candidate: **TerriLois Gregory**

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**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 <u>TERRILDIS GREGORY</u>			
Street <u>324 DEARBORN BOX 105</u>			
City <u>BALDWIN CITY</u>	County <u>DG</u>	Zip Code <u>66006</u>	
Home Telephone <u>785-222-0445</u>		Business Telephone <u>785-296-7646</u>	
Office Sought <u>KS ST REP</u>		District No. <u>10</u>	

TREASURER

Date Appointed <u>10 / 2011</u>			
Name <u>TERRILDIS GREGORY</u>			
Address <u>BOX 105, 324 DEARBORN</u>			
City <u>BALDWIN CITY KS</u>		Zip Code <u>66006</u>	
Home Telephone <u>785-222-0445</u>		Business Telephone <u>785-296-7646</u>	

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."

12/21/2011
(Date)

Terrildis Gregory
(Signature of Candidate)

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Candidate Candidate Name: **TerriLois Gregory**
Address: **Box 105**
Address2:
City: **Baldwin City** Zip: **66006-0105**
Home Phone: **(785) 222-0445** Business Phone: **(785) 296-7646** Cell Phone: **(785) 222-0445**
County: **Douglas** Email Address: **RepTLG@gmail.com**
Office Sought: **State Representative** District No.: **10**

Treasurer Date Appointed: **10/17/2011**
Treasurer Name: **TerriLois Gregory**
Address: **Box 105**
Address2:
City: **Baldwin City** State: **KS** Zip: **66006-0105**
Home Telephone: **(785) 222-0445** Business Phone: **(785) 296-7646** Cell Phone: **(785) 222-0445**
Email Address: **RepTLG@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: **11/22/2011 1:53:19 PM** Signature of Candidate: **TerriLois Gregory**

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Candidate

Candidate Name: **TerriLois Gregory**
Address: **324 Dearborn**
Address2:
City: **Baldwin Ctiy** Zip: **66006**
Home Phone: **(785) 222-0445** Business Phone: Cell Phone:
County: **Douglas** Email Address: **greg4rep@gmail.com**
Office Sought: **State Representative** District No.: **10**

Treasurer

Date Appointed: **01/21/2010**
Treasurer Name: **Patricia Howell**
Address: **12555 Glenwood**
Address2:
City: **Overland Park** State: **KS** Zip: **66209**
Home Telephone: **(913) 451-8386** Business Phone: Cell Phone:
Email Address: **greg4rep@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: **7/26/2010 9:37:00 AM** Signature of Candidate: **TerriLois Gregory**

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