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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: **Gerrett M Morris**
Address: **117 N. College Abe**
Address2:
City: **Salina** Zip: **67401**
Home Phone: **(785) 643-3268** Business Phone: **(785) 643-3268** Cell Phone: **(785) 643-3268**
County: **Saline** Email Address: **gerrettmorris@yahoo.com**
Office Sought: **State Representative** District No.: **69**

Treasurer

Date Appointed: **12/31/2011**
Treasurer Name: **Janice Morris**
Address: **1229 W. Falun Rd**
Address2:
City: **Assaria** State: **KS** Zip: **67416**
Home Telephone: **(785) 667-2885** Business Phone: **(785) 667-2885** Cell Phone: **(785) 822-4296**
Email Address: **mrsjanmmorris@aol.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: **12/31/2011 9:13:24 AM** Signature of Candidate: **Gerrett M. Morris**

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

RECEIVED

NOV 12 2009

This is an (Check one)



Initial Appointment



Amended Statement

KS Governmental Ethics Commission

CANDIDATE

(Please Type or Print)

Name Gerrett M. Morris		
Street 117 N. College		
City Salina	County Saline	Zip Code 67401
Home Telephone 785-643-3268		Business Telephone same
Office Sought House of Representatives		District No. 69

TREASURER

Date Appointed October 26, 2009	
Name Allan White	
Address 112 Neal ST	
City Salina	Zip Code 67401
Home Telephone 785-823-6823	Business Telephone

OR CANDIDATE COMMITTEE

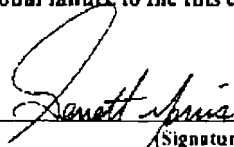
Date Appointed	
Chairperson's Name	
Address	
City	Zip Code
Home Telephone	Business Telephone
Treasurer's Name	
Address	
City	Zip Code
Home Telephone	Business Telephone

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."

11-12-09

(Date)



(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS