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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: **Mario Goico**  
Address: **1254 N Pine Grove Ct. N**  
Address2:  
City: **Wichita** Zip: **67212**  
Home Phone: **(316) 721-3682** Business Phone: Cell Phone:  
County: **Sedgwick** Email Address: **goico@cox.net**  
Office Sought: **State Representative** District No.: **100**

**Treasurer**

Date Appointed: **07/27/2012**  
Treasurer Name: **Larry Damm**  
Address: **12219 W 14th St N**  
Address2:  
City: **Wichita** State: **KS** Zip: **67235**  
Home Telephone: **(316) 722-1837** Business Phone: **(316) 517-6446** Cell Phone:  
Email Address: **ldamm@cessna.textron.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: **7/28/2012 11:20:47 AM** Signature of Candidate: **Mario Goico**

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This is an (Check one) ☒ **Initial Appointment** ☐ **Amended Statement**

**Candidate**

Candidate Name: **Mario Goico**  
Address: **1254 N Pine Grove Ct.**  
City: **Wichita** Zip: **67212**  
Home Phone: **3167213682** Business Phone: Cell Phone:  
County: **Sedgwick** Email Address: **goico@cox.net**  
Office Sought: **State Representative** District No.: **100**

**Treasurer**

Date Appointed: **07/24/2002**  
Treasurer Name: **Glen Baker**  
Address: **422 S Nineiron**  
City: **Wichit** State: **KS** Zip: **67235**  
Home Telephone: **3166402193** Business Phone: Cell Phone:  
Email Address: **gbaker@famhost.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: **10/24/2008 3:12:09 PM** Signature of Candidate: **Mario Goico**

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