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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: **Kim K Palcic**
Address: **1017 N Buchanan**
Address2:
City: **Olathe** Zip: **66061**
Home Phone: **(913) 302-1345** Business Phone: Cell Phone:
County: **Johnson** Email Address: **kkpalcic@gmail.com**
Office Sought: **State Representative** District No.: **15**

Treasurer Date Appointed: **06/30/2016**
Treasurer Name: **Christopher T Imm**
Address: **45-1 69th Terr**
Address2:
City: **Prairie Village** State: **KS** Zip: **66208**
Home Telephone: **(913) 722-0839** Business Phone: Cell Phone:
Email Address: **cimm@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:
Address:
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: **10/23/2016 8:33:23 PM** Signature of Candidate: **Kimberly K Palcic**

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This is an (Check one) Initial Appointment Amended Statement

Candidate Candidate Name: **Kim K Palcic**
Address: **PO Bix 16**
Address2:
City: **Olathe** Zip: **66051**
Home Phone: **(913) 302-1345** Business Phone: Cell Phone:
County: **Johnson** Email Address: **kkpalcic@gmail.com**
Office Sought: **State Representative** District No.: **15**

Treasurer Date Appointed: **06/30/2016**
Treasurer Name: **Christopher T Imm**
Address: **45-1 69th Terr**
Address2:
City: **Prairie Village** State: **KS** Zip: **66208**
Home Telephone: **(913) 722-0839** Business Phone: Cell Phone:
Email Address: **cimm@aol.com**

Candidate Date Appointed:
Committee Chairperson's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
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: **7/19/2016 10:04:04 AM** Signature of Candidate: **Kimberly K Palcic**

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

Candidate Candidate Name: **Kim K Palcic**
Address: **PO Bix 16**
Address2:
City: **Olathe** Zip: **66501**
Home Phone: **(913) 302-1345** Business Phone: Cell Phone:
County: **Johnson** Email Address: **kkpalcic@gmail.com**
Office Sought: **State Representative** District No.: **15**

Treasurer Date Appointed: **06/30/2016**
Treasurer Name: **Christopher T Imm**
Address: **45-1 69th Terr**
Address2:
City: **Prairie Village** State: **KS** Zip: **66208**
Home Telephone: **(913) 722-0839** Business Phone: Cell Phone:
Email Address: **cimm@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:
Address:
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: **7/11/2016 9:19:33 AM** Signature of Candidate: **Kim K Palcic**

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

RECEIVED
JUL 05 2016
KS Governmental Ethics Commission

This is an (Check one) Initial Appointment Amended Statement

CANDIDATE
(Please Type or Print)

Name Kim Palcic		
Street 1017 N Buchanan		
City Olathe	County Johnson	Zip Code 66061
Home Telephone 913-302-1345	Business Telephone n.a	
Office Sought KS House of Representative	District No. 15	

TREASURER

Date Appointed June 30, 2016		
Name Chris Imm		
Address 4501 69th Terr		
City Prairie Village	Zip Code 66208	
Home Telephone 913-722-0839	Business Telephone 913-469-8500	

OR CANDIDATE COMMITTEE

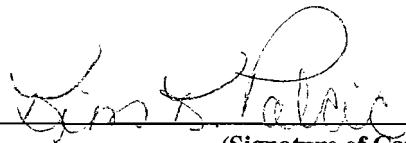
Date Appointed		
Chairperson's Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	
Treasurer's Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	

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."

July 1, 2016

(Date)



(Signature of Candidate)

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

Candidate Candidate Name: **Kimberly K Palcic**
Address: **1017 N Buchanan**
Address2:
City: **Olathe** Zip: **66061**
Home Phone: **(913) 302-1345** Business Phone: Cell Phone: **(913) 302-1345**
County: **Johnson** Email Address: **kkpalcic@gmail.com**
Office Sought: **State Representative** District No.: **15**

Treasurer Date Appointed: **01/14/2016**
Treasurer Name: **Ronald Palcic**
Address: **1017 N Buchanan**
Address2:
City: **Olathe** State: **KS** Zip: **66061**
Home Telephone: **(913) 961-9599** Business Phone: Cell Phone: **(913) 951-9599**
Email Address: **ron.palcic@gmail.com**

Candidate Date Appointed:
Committee 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: **1/14/2016 6:38:25 PM** Signature of Candidate: **Kimberly K Palcic**

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