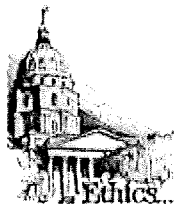


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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
901 S. Kansas Avenue
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

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

Candidate Candidate Name: **Sherri D Grogan**
Address: **16635 Leavenworth Road**
Address2:
City: **Basehor** Zip: **66007**
Home Phone: **(913) 724-1900** Business Phone: Cell Phone: **(913) 226-6705**
County: **Leavenworth** Email Address: **sdr7304@gmail.com**
Office Sought: **State Representative** District No.: **38**

Treasurer Date Appointed: **05/15/2020**
Treasurer Name: **Naomi Kilpatrick**
Address: **4305 N 141st Ct**
Address2: **16635 Leavenworth Road**
City: **Basehor** State: **KS** Zip: **66007**
Home Telephone: Business Phone: Cell Phone: **(913) 221-7840**
Email Address: **njkilpatrick@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:
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: **5/24/2020 12:38:13 PM** Signature of Candidate: **Sherri D. Grogan**

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