

Print this form or Go Back



**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: **Jerry W Stogsdill**

Address: **4414 Tomahawk Road**

Address2:

City: **Prairie Village** Zip: **66208**

Home Phone: **(913) 384-3393** Business Phone: **(913) 384-3393** Cell Phone:

County: **Johnson** Email Address: **jws4414@aol.com**

Office Sought: **State Representative** District No.: **21**

Treasurer Date Appointed: **07/24/2018**

Treasurer Name: **Cole Robinson**

Address: **5336 W. 67th St**

Address2:

City: **Prairie Village** State: **KS** Zip: **66208**

Home Telephone: Business Phone: Cell Phone: **(785) 979-6094**

Email Address: **colemrobinson@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: **10/14/2022 1:12:12 PM** Signature of Candidate: **Cole M Robinson**

[Print](#) this form or [Go Back](#)



**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: **Jerry W Stogsdill**
Address: **4414 Tomahawk Road**
Address2:
City: **Prairie Village** Zip: **66208**
Home Phone: **(913) 384-3393** Business Phone: **(913) 384-3393** Cell Phone:
County: **Johnson** Email Address: **jws4414@aol.com**
Office Sought: **State Representative** District No.: **21**

Treasurer Date Appointed: **07/24/2018**
Treasurer Name: **Cole Robinson**
Address: **9121 Roe Ave.**
Address2:
City: **Prairie Village** State: **KS** Zip: **66207**
Home Telephone: Business Phone: Cell Phone: **(785) 979-6094**
Email Address: **colemrobinson@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: **7/24/2018 12:33:02 PM** Signature of Candidate: **Jerry W Stogsdill**

[Print](#) this form or [Go Back](#)