APPOINTMENT OF TREASURER OR CANDIDATE COMMITTEE FORM ÓR CANDIDATE FOR STATE OFFICE Initial Appointment This is an (Check one) Amended Statement CANDIDATE (Please Type or Print) Name CHOMPASS MERRICK Street 164 H TELR City County Zip Code 66085. JOHNSON **Business Telephone** Home Telephone 897 4014 669.8586 913 913. Office Sought District No. STATE SENATE TREASURER Date Appointed 23 NOV 2010 Name PETER FREUND Address 11731 S ROUNDTREE City Zip Code CLATHE 66081 **Business Telephone** Home Telephone 913 236 0295 7662 OR CANDIDATE COMMITTEE **Date Appointed** Chairperson's Name Address Zip Code City 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."

SEE REVERSE SIDE FOR INSTRUCTIONS

Governmental Ethics Commission

Rev.2000