

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

This is an (Check one)  Initial Appointment  Amended Statement  
(Please Type or Print)

**CANDIDATE**

Name <i>Robert McGregor</i>			
Mailing Address <i>11310 192nd Rd</i>			
City <i>Waukegan</i>	County <i>Cowles</i>	Zip Code <i>67156</i>	
Telephone <i>620 226 9486</i>	Email		
Office Sought <i>Treasurer</i>	District No. <i>Waukegan Township</i>		

**TREASURER**

Date Appointed	
Name <i>Self</i>	
Mailing Address	
City	Zip Code
Telephone	Email

**OR CANDIDATE COMMITTEE**

Date Appointed	
Chairperson's Name	
Mailing Address	
City	Zip Code
Telephone	Email
Treasurer's Name	
Mailing Address	
City	Zip Code
Telephone	Email

**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."

*5-30-24*  
(Date)

*Robert S. McGregor*  
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

## **INSTRUCTIONS**

This form must be completed by each candidate for state office and filed with the Secretary of State (Memorial Hall - 1<sup>st</sup> floor, 120 SW 10<sup>th</sup>, Topeka, KS 66612-1594). A candidate must appoint a treasurer, or in lieu thereof a candidate committee, not later than ten (10) days after becoming a candidate. This form must be filed not later than ten (10) days following such appointment. Also, a new form must be filed whenever there is a change in treasurers or other information previously reported.

For further information contact:

Governmental Ethics Commission  
901 S. Kansas Avenue  
Topeka, Kansas 66612  
Ofc 785-296-4219  
Fax 785-296-2548