Office of the Kansas Secretary of State

Candidate's Declaration of Intention

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1 Ballot Information			
Name (as it will appear on the ballot, including punctuation)		
City of Residence (as it will appear on the ballot)			
Office Sought	District No.		
Party Nomination Sought: O Democratic O Republican Term: O Regular O Unexpired			
2 Elected Judicial Candidates Only (complete if applicable)			
District Court Judge Division No.	District Magistrate Judge Position No.		
3 Contact Information			
Residential Address			
City	County		Zip
Mailing Address (if different from residential address)	City	State	Zip
Phone (optional)	Cell Pho	ne (optional)	
Email (optional)	Website (optional)		
4 Candidate Signature			
I declare that I am affiliated with the above-state and that I intend to become a candidate for the stated office at the appropriate election. Date / /		SIGN I	N THIS BOX
ATTESTATION (for office use only)			
Secretary of State or County Election Officer			
Assistant Secretary of State or Deputy County Election Officer			
Notary (applicable only for precinct committeeman or committee	ewoman)		