## Office of the Kansas Secretary of State Candidate's Declaration of Intention

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 Republic	can Term: O Regular O Unexpired			
2	Elected Judicial Candidates Only (comple	te if applica	able)		
	District Court Judge Division No.	District Mag	District Magistrate Judge Position No.		
3	Contact Information () All information is public record				
	Select one: OMr. OMs. OMrs. ODr.				
	Residential Address				
	City	County		Zip	
	Mailing Address (if different from residential address)	City	State	Zip	
	Phone (optional)	Cell Phone (optional)			
	Email (optional)	Website (optional)			
4	Candidate Signature				
	I declare that I am affiliated with the above-state	ed party			
	and that I intend to become a candidate for the				
	stated office at the appropriate election.				
	Date / / Month Day Year		SIGN	IN 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 committeewoman)					