FILING CHECKLIST PRECINCT COMMITTEE

(Filing deadline is June 1st at Noon) (No filing fee is required)

☐ Candidate's Declaration of Intention Form (File with Marion County Clerk)

Office of the Kansas Secretary of State Precinct Committeeman/Committeewoman Candidate's Declaration of Intention



1. Ballot Information		٠
Name (exactly as it will appear on the ballot,	including all punctuation)	
City	Precinct	
Select one: ☐ Committeeman ☐ Comm Party nomination sought: ☐ Democratic		
2. Office Information Please print.	en e	
Preferred title: ☐ Mr. ☐ Mrs. ☐ Ms.	Date filed://	
Residential Address		
City	Zip Code	
Email Address	Home Phone Number Work Phone Number	 ∍r
3. Mailing Address (if different from residen	ntial address)	
Mailing Address		
City	State Zip Code	
4. Candidate Statement and Signature		
I declare that I am affiliated with the above-s the above-stated office at the appropriate ele	tated party and that I intend to become a candidate fection.	[:] or
Sign here Signature of Candidate	·	
5. Attestation		
Notary		
State County	200 (AKX 21850)	
GIGIG COUNTY		