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

FORM
PD

1. Ballot Information

_____
Name *(exactly as it will appear on the ballot, including all punctuation)*

_____ _____
City Precinct

Select one: ☐ Committeeman ☐ Committeewoman
Party nomination sought: ☐ Democratic ☐ Republican

2. Office Information **Please print.**

Preferred title: ☐ Mr. ☐ Mrs. ☐ Ms. **Date filed:** ____ / ____ / _____

_____
Residential Address

_____ _____
City Zip Code

_____ _____ _____
Email Address Home Phone Number Work Phone Number

3. Mailing Address **(if different from residential address)**

_____
Mailing Address

_____ _____ _____
City State Zip Code

4. Candidate Statement and Signature

I declare that I am affiliated with the above-stated party and that I intend to become a candidate for the above-stated office at the appropriate election.

Sign here _____
Signature of Candidate

5. Attestation

_____
Notary

_____ _____
State County

NOTARY STAMP