

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

DOWNLOAD THIS FORM AT WWW.SOS.KS.GOV



1 Ballot Information

Larry R. Schwartz
Name (as it will appear on the ballot, including punctuation)

Arkansas City
City of Residence (as it will appear on the ballot)

County Attorney Office Sought
District No.

Party Nomination Sought: Democratic Republican Term: Regular Unexpired

2 Elected Judicial Candidates Only (complete if applicable)

District Court Judge Division No. District Magistrate Judge Position No.

3 Contact Information All information is public record

Select one: Mr. Ms. Mrs. Dr.

515 N. 4th Street
Residential Address

Arkansas City City Cowley County 67005 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-stated party and that I intend to become a candidate for the above-stated office at the appropriate election.

Date 05/21/2024
Month Day Year

ATTESTATION (for office use only)

Karen Madson
Secretary of State or County Election Officer

Assistant Secretary of State or Deputy County Election Officer

Notary (applicable only for precinct committeeman or committeewoman)