CS

KANSAS SECRETARY OF STATE

City/School Candidate's Declaration of Intention

1. **Name** List exactly as it will appear on ballot, including all punctuation.	Joel M Haden II
2. **City**	Cedar Vale
3a. **Office sought**	School Board
3b. **District Number**	285
4. **Term**	☑ Regular ☐ Unexpired
5. **Preferred title** Used for mailing purposes.	☐ Mr. ☐ Mrs. ☑ Ms. ☐ Dr.
6. **Residential address** Provide a street or rural route. Do not leave blank.	Address: 306 Maple Road City: Cedar Vale County: CQ Zip: 67024
7. **Mailing address** Complete if mailing address is different from above.	Address: P.O. Box 351 City: Cedar Vale State: KS Zip: 67024
8. **Telephone number**	Home: — Work: Cell: 316-200-0524
9. **Email address**	cvantiquemerchant@yahoo.com

10. I declare that I intend to become a candidate for the above-stated office at the appropriate election.

Signature of Candidate
X Joel M Haden II

Today's Date: Mo. 5 Day 30 Yr. 25

County Election Officer or City Clerk
X

Deputy Election Officer
X Rebecca Smith

K.S.A. 25-2020, 25-2110, 25-2110a
Rev. 12/06/10 jdr

Please review to ensure completion.