



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, inc	ν	
	luding all punctuation)	
Apr gasas City	AC3C	
City /	Precinct	
Select one: 🔀 Committeeman 🗌 Committee Party nomination sought: 🔲 Democratic 🔲	ewoman Republican	
2. Office Information Please print.		
Preferred title: W Mr. Mrs. Ms.	Date filed: 2 /02	512024
(9) 2 W. Adams Ave Residential Address		
Arkansas Con City	[57005
City	Zip	Code
endail Address	620442608	3 62014/8213
Endail 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		
declare that I am affiliated with the above-state the above-stated office at the appropriate election	d party and that I intend n.	to become a candidate for
Sign here Lang Manager		
Signature of Candidate		
5. Attestation		
La 104 Madina	KAREN MADIS	SON
Ngtary	COWLEY COUN	VTY
h8 ('oulleil	CLERK	
State County	113/35)