

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

FORM
PD

1. Ballot Information

Carol S. Birch
Name (exactly as it will appear on the ballot, including all punctuation)
Hesston 1W-2P
City Precinct

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

2. Office Information Please print.

Preferred title: ☐ Mr. ☐ Mrs. ☒ Ms. Date filed: ____/____/____
405 N. Weaver
Residential Address
Hesston 67062
City Zip Code
csbirch@cox.net 620-327-2274 620-217-9552
Email Address Home Phone Number Work Phone Number
cell

3. Mailing Address (if different from residential address)

P.O. Box 430
Mailing Address
Hesston KS 67062
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

Carol S. Birch
Signature of Candidate

5. Attestation

Roxana Koch
Notary
KS Harvey
State County



NOTARY STAMP