



KANSAS SECRETARY OF STATE
Affidavit of Write-in Candidacy
for 1st Class City Office
 State of Kansas

Memorial Hall, 1st Floor
 120 S.W. 10th Avenue
 Topeka, KS 66612-1594

(785) 296-4561
 election@sos.ks.gov
 www.sos.ks.gov

Note: This form must be filed with your local county election office.

State of **Kansas**

County of **Labette**

} SS:

1. Name of office

Office

2. Name of candidate

Last

First

MI

3. Residential address

Do not leave blank.

Address

City

State

Zip

4. Mailing address

Complete if mailing address is different from above.

Address

City

State

Zip

5. Telephone number

Home

Work

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

Signature of Candidate

Day

Month

Year

Subscribed and sworn to me this

day of

20

Officer Authorized to Administer Oaths