

City/School Form
CS

Candidate's Declaration of Intention

BALLOT INFORMATION:

1. Name - exactly as it will appear on the ballot (include ALL punctuation):

Jolene Born

2. City:

Eudora, KS

3a. Office sought City Commissioner

3b. District no. _____

4. Term: Regular Unexpired _____

OFFICE INFORMATION:

5. For mailing purposes, indicate preferred title: Mr. Mrs. (Ms) 6. Date filed _____

7. Residential address (street or rural route) 1303 Hickory St.

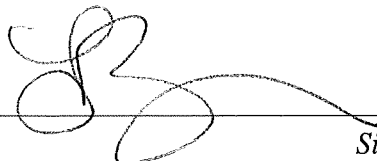
8. City Eudora 9. County Douglas 10. Zip code 66025

11. Mailing address (if different) S/A

12. Telephone number: Home 9134242129 Work _____

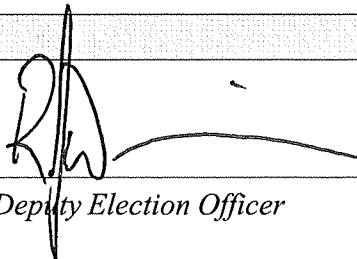
CANDIDATE STATEMENT & SIGNATURE:

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


Signature of Candidate

ATTESTATION:

County Election Officer
or City Clerk


Deputy Election Officer

3698003

by June 10th

STATEMENT OF SUBSTANTIAL INTERESTS FOR LOCAL OFFICE

INSTRUCTIONS. This statement must be completed by each person required to do so by K.S.A. 75-4301a. Upon completion, mail or hand deliver your completed statement to the office where you filed your declaration of candidacy. If appointed to fill a vacancy in a local elective office, file this form where your predecessor filed for office.

PLEASE TYPE OR PRINT

A. IDENTIFICATION:

Born Tolene M.

Last Name First Name MI

N/A

Spouse's Name

1303 Hickory St.

Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number

Eudora KS 66025

City, State, Zip Code

9134242129

Home Phone

Business Phone

B. OFFICE SOUGHT, HELD OR APPOINTED TO:

City Commissioner - City of Eudora

List Name of Office

Eudora

Position

District

CONTINUED ON NEXT PAGE

Date received (Official use only)

E. RECEIPT OF COMPENSATION: List all places of employment in the last calendar year, and any other businesses from which you or your spouse received \$2,000 or more in compensation (salary, thing of value, or economic benefit conferred on you or your spouse in return for services rendered, or to be rendered), which was reportable as taxable income on your federal income tax returns.

1. YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR.

If you have nothing to report in Section "E"1, check here .

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.	Douglas County	330 NE Industrial	Gov't.
2.			

2. SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR.

If you have nothing to report in Section "E"2, check here .

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.			
2.			

F. OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position as officer, director, associate, partner or proprietor at the time of filing, irrespective of the amount of compensation received for holding such position. Please insert additional pages if necessary to complete this section.

If you have nothing to report in Section "F", check here .

	BUSINESS NAME AND ADDRESS	POSITION HELD	HELD BY WHOM
1.			
2.			
3.			
4.			
5.			

**AFFIDAVIT OF EXEMPTION
FROM FILING RECEIPTS AND EXPENDITURES REPORTS
BY A CANDIDATE FOR CITY OFFICE**

IF YOU ANTICIPATE RECEIVING OR EXPENDING \$1000 IN THE PRIMARY, EXCLUSIVE OF THE CANDIDATE FILING FEE, OR \$1000 IN THE GENERAL ELECTION, THIS FORM MAY NOT BE USED.

Instructions: This form may be used by any candidate for city office who qualifies for the exemption. **IT MUST BE FILED WITH THE COUNTY ELECTION OFFICER, IN THE COUNTY IN WHICH THE CANDIDATE IS ON THE BALLOT, PRIOR TO JULY 26, 2021.** If a candidate qualifies for this exemption, he or she still must appoint a treasurer or candidate committee and the treasurer must maintain the required records. (K.S.A. 25-4144) See reverse for examples.

PLEASE PRINT OR TYPE

A. Name of Candidate Jolene Born
Address 1303 Hickory St City Eudora Zip Code 66025
Home Telephone 9134242129 Business Telephone _____
Office Sought City Commissioner District No. Eudora

B. Affidavit:
State of Kansas)
County of _____)

I, Jolene Born, do swear (or affirm) that:

1. The information in Item A above is true and correct;
2. I intend to expend, contract to expend, or have expended, on my behalf an aggregate amount or value of less than one thousand dollars (\$1000) in the primary election period; and
3. I intend to receive or have received on my behalf (including amounts contributed by myself) contributions of an aggregate amount or value of less than one thousand dollars (\$1000) in the primary election period; and
4. I understand that the payment of my filing fee, or the receipt of funds to pay my filing fee, is not included in the limitations set forth in paragraphs 2 & 3; and
5. I intend to expend, contract to expend or have expended on my behalf an aggregate amount or value of less than one thousand dollars (\$1000) in the general election period; and
6. I intend to receive or have received on my behalf (including amounts contributed by myself) contributions of an aggregate amount or value of less than one thousand dollars (\$1000) in the general election period; and
7. If contributions are received or expenditures made (actual or contractual) in excess of any of the amounts set out above, I shall within three (3) days of the date of such excess file all past due Receipts and Expenditures Reports and shall file all such future reports on the dates required by K.S.A. 25-4148. (K.S.A. 25-4174)

5/12/2021
(Date)

[Signature]
(Signature of Candidate)

Subscribed and sworn to (affirmed) before me this _____ day of _____, 20 _____

[Signature]
(Notary Public)

(Seal)

My Appointment Expires _____, 20 _____