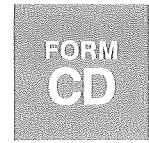


2739750

Candidate's Declaration of Intention

DOWNLOAD THIS FORM AT WWW.SOS.KS.GOV



1 Ballot Information

Lisa Larsen

Name (as it will appear on the ballot, including punctuation)

Lawrence

City of Residence (as it will appear on the ballot)

City Commission

Office Sought

District No.

DOUGLAS COUNTY CLERK
MAR 5 PM 1:07

Party Nomination Sought: Democratic Republican

Term: Regular Unexpired

2 Elected Judicial Candidates Only (complete if applicable)

District Court Judge Division No.

District Magistrate Judge Position No.

3 Contact Information ! All information is public record

Select one: Mr. Ms. Mrs. Dr.

1117 Avalon Road

Residential Address

Lawrence

City

Douglas

County

66044

Zip

Lawrence

City

Ks

State

66044

Zip

Mailing Address (if different from residential address)

Phone (optional) _____ - _____ - _____

Cell Phone (optional) 785 - 331 - 9162

lisalarsen.lawrence@gmail.com

Email (optional)

larsencitycommission.com

Website (optional)

4 Candidate 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.

Date 03 / 01 / 2021
Month Day Year

ATTESTATION (for office use only)

Secretary of State or County Election Officer

Assistant Secretary of State or Deputy County Election Officer

Notary (applicable only for precinct committeeman or committeewoman)