

City/School Form

Candidate's Declaration of Intention **CS**

BALLOT INFORMATION:

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

Bob Byers

2. City:

Lawrence

3a. Offices sought

School Board

3b. District no.

197

4. Term: Regular

☒ Unexpired

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OFFICE INFORMATION:

5. For mailing purposes, indicate preferred title:

☒ Mr.

Mrs.

Ms.

6. Date filed

3/11/25

7. Residential address (street or rural route)

1702 E 21st Terr

8. City

Lawrence

9. County

Douglas

10. Zip code

66045

11. Mailing address (if different)

12. Telephone number:

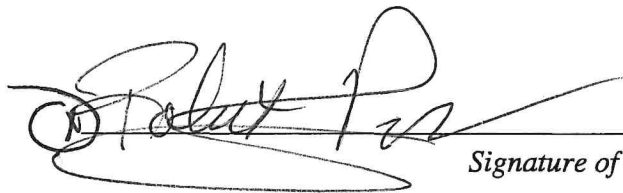
Home

785-979384

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