Candidate's Declaration of Intention City/School Form CS

BALLOT INFORMATION:
1. Name - exactly as it will appear on the ballot (include ALL punctuation):
Markus Logan
2. City: MARKUS
Lawrence
3a. Office sought USD 497 School Board.
3b. Districtno. 497
4. Term: Regular YUnexpired
markus Thegana gmail:com
OFFICE INFORMATION:
5. For mailing purposes, indicate preferred title: Mr. Mrs. Ms. 6. Date filed 4/1/21 7. Residential address (street or rural route) 700 Monterey Way K3 8. City Lawrence 9. County Douglas 10 Zip code 6049 11. Mailing address (if different) 12. Telephone number: Home 785-979-0769 Work
CANDIDATE STATEMENT & SIGNATURE:
I declare that I intend to become a candidate for the above-stated office at the appropriate election.
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Clary from
Signature of Candidate
APPESTATION:
County Election Officer or City Clerk Deputy Election Officer

KSA 25-2020, 25-2110, 25-2110a

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APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM FOR CANDIDATE FOR LOCAL OFFICE

This is an (Check one)	Initial Appointment Amended Statement				
CANDIDATE	(Please Type or Print)				
Name markus Logar	n				
Street 700 Monteber	way K3				
City Laurence County Douglas Zip Code 66049					
Home Telephone 785-976	9-0769 Business Telephone				
Office Sought USD 497 S	chool Board District No. 497				
	, /				
TREASURER					
Date Appointed 5/2/2/					
Name Janine Colter					
Address 2009 Lank	First Dr				
City Lawrence	Zip Code 66046				
Home Telephone 745-31	2 - V2(3 Business Telephone				
OR CANDIDATE COMMIT	rrr				
Date Appointed	1 CE				
Chairperson's Name					
Address					
City	Zip Code				
Home Telephone					
Treasurer's Name					
Address					
City	Zip Code				
Home Telephone					
American Constitution Constitut	**************************************				
SIGNATURE					
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(Date)	Chan In				
(Date)	(Signature of Candidate)				
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overnmental Ethics Commission	Rev.2000				

INSTRUCTIONS

This form must be completed by each candidate for local office and filed with your County Election Officer. A candidate must

appoint a treasurer, or in lieu thereof a candidate committee, not later than ten (10) days after becoming a candidate. This form

must be filed not later than ten (10) days following such appointment. Also, a new form must be filed whenever there is a change

in treasurers or other information previously reported.

For further information contact:

Kansas Governmental Ethics Commission

109 West 9th, Suite 504

Topeka, Kansas 66612 Ofc 785-296-4219

Fax 785-296-2548