

Candidate's Declaration of Intention **CS**

City/School Form

BALLOT INFORMATION:

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

Myranda Zarlengo

2. City:

Lawrence KS

3a. Office sought

School Board

3b. District no.

USD 497

4. Term: Regular

Unexpired

ZARlengo.MYRANDA@gmail.com

OFFICE INFORMATION:

5. For mailing purposes, indicate preferred title:

Mr. Mrs. Ms.

6. Date filed

6-1-21

7. Residential address (street or rural route)

1431 Legends Cir

8. City

Lawrence

9. County

Douglas

10. Zip code

66049

11. Mailing address (if different)

12. Telephone number:

Home

312-285-3480

Work

CANDIDATE STATEMENT & SIGNATURE:

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

Myranda Zarlengo

Signature of Candidate

ATTESTATION:

County Election Officer
or City Clerk

Deputy Election Officer

JUN 21 AM 11:24
DOUGLAS COUNTY CLERK

5801274



Douglas County Elections

Jamie Shew, Douglas County Clerk/Chief Election Officer

Affidavit of Exemption

K.S.A. 25-904(a)

Instructions

- ✓ File this report with the Douglas County Clerk's Office
- ✓ Applicable to candidates in third class cities' mayoral and council, community college, township, school, water, and drainage elections.
- ✓ Candidates who anticipate receiving or spending less than \$1000 in each of the Primary and General elections, exclusive of any filing fees, may use this form to exempt themselves from filing reports of expenditures.
- ✓ For exemption, a candidate must complete this Affidavit of Exemption and file it with the Douglas County Clerk's office **nine (9) days before the primary election**. Even if the candidate anticipates not being in a Primary Election, this form is due by the deadline to be valid.
- ✓ Once the form is filed it will exempt the candidate from filing the required Candidate's Itemized Receipts and Expenditures Report, which is due thirty (30) days after each applicable election. Records should still be maintained in case the expenditure limit is exceeded during the election.

Name (Please Print) Myranda Zarlengo

Address 1431 Legends Cir

Home Phone 312-285-3450 Business _____

Office Sought School Board District Number (if applicable) 497

Affidavit: State of Kansas, County of Douglas

I, Myranda Zarlengo, do swear (or affirm) that:

1. The information listed 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 and General 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 and General Election** period, and
4. I understand that the payment of my filing fee or the receipt of funds to pay my filing fee are 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 **Primary and 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 **Primary and General Election** period, and
7. If contributions or expenditures made (actual or contractual) in excess of any of the amounts set above, I shall within thirty days after the date of the election file the Candidates Itemized Statement of Receipts and Expenditures Report required by K.S.A. 25-904(b)

Signature of Candidate Myranda Zarlengo

Date 5-27-21

Subscribed and sworn before me, this 1ST day of June, 2021

[Signature]
Notary Public

My appointment expires _____

JUN 21 10 54 AM '21
CLERK'S OFFICE
DOUGLAS COUNTY, KANSAS

**APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM
FOR CANDIDATE FOR LOCAL OFFICE**

This is an (Check one) Initial Appointment Amended Statement
(Please Type or Print)

CANDIDATE

Name	Myranda Zarlengo		
Street	1431 Legends Cir		
City	Lawrence	County	Douglas Zip Code 66049
Home Telephone	312-285-3450	Business Telephone	
Office Sought	District No.		

TREASURER

Date Appointed	5-27-21		
Name	Myranda Zarlengo		
Address	1431 Legends Cir		
City	Lawrence	Zip Code	66049
Home Telephone	312-285-3450	Business Telephone	

OR CANDIDATE COMMITTEE

Date Appointed			
Chairperson's Name			
Address			
City		Zip Code	
Home Telephone		Business Telephone	
Treasurer's Name			
Address			
City		Zip Code	
Home Telephone		Business Telephone	

SIGNATURE

"I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

5-27-21

(Date)

Myranda Zarlengo

(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS