

Candidate's Declaration of Intention

City/School Form
KSA 25-2020, 25-2110, 25-2110a
Rev. 12/00 bac

BALLOT INFORMATION:

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

NORRAINE "WAYNIE" WINGFIELD

2. City:

LECOMPTON

3a. Office sought

CITY COUNCIL

3b. District no.

4. Term: Regular

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Unexpired

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OFFICE INFORMATION:

5. For mailing purposes, indicate preferred title:

Mr.

Mrs.

Ms

6. Date filed

7. Residential address (street or rural route)

705 Whitfield St

8. City

LECOMPTON

9. County

Dg

10. Zip code

66050

11. Mailing address (if different)

12. Telephone number:

Home

785 592 1323

Work

CANDIDATE STATEMENT & SIGNATURE:

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

Norraine Waynie Wingfield
Signature of Candidate

ATTESTATION:

County Election Officer
or City Clerk

[Signature]
Deputy Election Officer