

Candidate's Declaration of Intention

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**FORM
CD****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)

Douglas Co. Commission

Office Sought

2

District No.

Party Nomination Sought: ☒ Democratic ☐ RepublicanTerm: ☒ Regular ☐ Unexpired**2 Elected Judicial Candidates Only (complete if applicable)**

District Court Judge Division No.

District Magistrate Judge Position No.

3 Contact Information **1 All information is public record**Select one: ☐ Mr. ☒ Ms. ☐ Mrs. ☐ Dr.1117 AVALON ROAD

Residential Address

LAWRENCE

City

Douglas

County

66044

Zip

Mailing Address (if different from residential address)

City

State

Zip

Phone (optional)

Cell Phone (optional)

785 - 331 - 9162

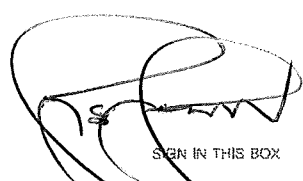
Email (optional)

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 05 / 06 / 2024
Month Day Year


SIGN IN THIS BOX

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)