

Candidate's Declaration of Intention

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FORM
CD

2748751

1 Ballot Information

SHANNON REID

Name (as it will appear on the ballot, including punctuation)

LAWRENCE

City of Residence (as it will appear on the ballot)

**DOUGLAS COUNTY
COMMISSIONER**

2

Office Sought

District No.

Party Nomination Sought: Democratic Republican

Term: Regular Unexpired

2 Elected Judicial Candidates Only (complete if applicable)

District Court Judge Division No.

District Magistrate Judge Position No.

3 Contact Information ! All information is public record

Select one: Mr. Ms. Mrs. Dr.

2501 HARPER ST.

Residential Address

LAWRENCE

DOUGLAS

66046

City

County

Zip

Mailing Address (if different from residential address)

City

State

Zip

Phone (optional) **785-979-5993**

Cell Phone (optional) _____

shannon4commissioner@gmail.com

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 **06/01/2020**
Month Day Year

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)

JUN 1 2020 AM 11:05