

Candidate's Declaration of Intention

DOWNLOAD THIS FORM AT WWW.SOS.KS.GOV

**FORM
CD****1 Ballot Information**

Jim D. Gabriel
 Name (as it will appear on the ballot, including punctuation)

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

Township Trustee
 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 **1 All information is public record**

Select one: ☒ Mr. ☐ Ms. ☐ Mrs. ☐ Dr.

2267 N. 1200rd
 Residential Address

Eudora Dg 66025
 City County Zip

 Mailing Address (if different from residential address) City State Zip

Phone (optional) _____ - _____ - _____ Cell Phone (optional) _____ - _____ - _____

 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 05/11/2024
 Month Day Year

Jim D. Gabriel
 SIGN IN THIS BOX

ATTESTATION (for office use only)

 Secretary of State or County Election Officer
Chad C. Hefner
 Assistant Secretary of State or Deputy County Election Officer

 Notary (applicable only for precinct committeeman or committeewoman)