



**KANSAS SECRETARY OF STATE**  
**Affidavit of Write-in Candidacy**  
**for 1st Class City Office**  
 State of Kansas

Memorial Hall, 1st Floor  
 120 S.W. 10th Avenue  
 Topeka, KS 66612-1594

(785) 296-4561  
 election@sos.ks.gov  
 www.sos.ks.gov

**Note: This form must be filed with your local county election office.**

State of
County of

} SS:

<b>1. Name of office</b>	Office		
<b>2. Name of candidate</b>	Last	First	MI
<b>3. Residential address</b> Do not leave blank.	Address		
	City	State	Zip
<b>4. Mailing address</b> Complete if mailing address is different from above.	Address		
	City	State	Zip
<b>5. Telephone number</b>	Home		Work

<b>6. I declare that I intend to become a candidate for the above-stated office at the appropriate election.</b>			
Signature of Candidate			
Day	Month	Year	
Subscribed and sworn to me this	day of	20	
Officer Authorized to Administer Oaths			