2020 Candidate Information
Townships - Filing Requirements

2020 Election Dates:
Primary: August 4, 2020
General: November 3, 2020

Filing Deadline:
Noon, Monday, June 1, 2020 for Partisan Filings [KSA 25-205]
Noon, Monday, August 3, 2020 for Independent Nominations [KSA 25-305(b)]

Filing Location: [KSA 25-206]
Candidates must file at the
Lyon County Election Office
430 Commercial Street
Emporia, Kansas 66801

Filing by Fee:
Township filing fee is $1.

Filing by Petition:
Democratic and Republican primary candidates must have valid signature of 3% of the party’s registration from the township. [KSA 25-205(e)(4)]

Independent candidates must have 5% or not less than 10 (whichever is more) valid signatures of the registered voters in the township. [KSA 25-303(d)]

Documents to be Filed:
Declaration of Intention (Filing Form)
• Form is provided by and is filed with the Election Office.
• Election office sends a copy of the declaration to the Governmental Ethics Commission (GEC) for the purpose of campaign finance reporting.

Nomination Petition (used if filing by petition)
• Form is provided by and is filed with the Election Office.

Statement of Substantial Interests for Local Office
• Completed form is due no later than ten (10) days after the filing deadline.
• Form is filed with the Election Office.

Affidavit of Exemption from Filing Receipts and Expenditures Reports
• Form is provided by and is filed with the Election Office
• Completed form is due nine (9) days prior to the primary election.
• If a candidate anticipates receiving and spending less than $1000.00 in the Primary Election and anticipates receiving and spending less than an additional $1000.00 in the General Election, he/she can file an Affidavit of Exemption. This affidavit waives the need for a candidate to file campaign Receipts and Expenditures Reports.
• Completed form is due nine (9) days prior to the primary election.
• Completed form is filed with the Election Office.
• Form must be notarized.

Itemized Statement of Campaign Receipt & Expenditures Report (only if no Affidavit of Exemption is Filed)
• Form is provided by the Election Office.
• Completed reporting form is filed with the Election Office within 30 days after each Primary and General election. [KSA 25-904(b)]
• In addition to reporting all campaign expenditures, these candidates are now required to itemize contributions in excess of $50.00. Itemizing means listing the name and address of the contributor, the date on which the contribution is received and the amount of the contribution.
• If all transactions were directed to the treasurer or committee, form is still required to be filed by the candidate, listing all zeros ($0.00).
• Form must be notarized.
Office of the Kansas Secretary of State
Candidate’s Declaration of Intention
DOWNLOAD THIS FORM AT WWW.SOS.KS.GOV

1 Ballot Information

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

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

Office Sought __________________________________________________________________________
District No. __________________________________________________________________________

Party Nomination Sought: O Democratic O Republican Term: O Regular O Unexpired

2 Elected Judicial Candidates Only (complete if applicable)

District Court Judge Division No. __________________________________________________________________________
District Magistrate Judge Position No. __________________________________________________________________________

3 Contact Information O All information is public record

Select one:  O Mr.  O Ms.  O Mrs.  O Dr.

Residential Address

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 __ __ / __ __ / __ __ __________
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)

Prepared by the Office of the Secretary of State
1st Floor, Memorial Hall, Topeka, KS 66612-1594
KSA 25-205(a), 25-206(a). Rev 7/7/11 pd
Affidavit of petition circulator

STATE OF KANSAS

COUNTY OF ____________________________

I, ____________________________________________,

Print Name

(check one):

____ I am the circulator of this petition. I am qualified to circulate this petition and I personally witnessed the signing of the petition by each person whose name appears thereon.

____ I am the candidate

________________________________________
Signature

________________________________________
Circulator's residence address

Subscribed and sworn to before me this _____ day of ______________________, 20____.

(SEAL)

________________________________________
Person authorized to administer oaths

My appointment expires ________________________, 20____.

Kansas law states that a petition circulator is a person who is a U.S. citizen, at least 18 years of age, and has not been convicted of a felony, or if convicted of a felony has been pardoned or restored to such person's civil rights.

K.S.A. 25-205(d) Rev 7/2/14 kc
**STATEMENT OF SUBSTANTIAL INTERESTS FOR LOCAL OFFICE**

**INSTRUCTIONS.** This statement must be completed by each person required to do so by K.S.A. 75-4301a. Upon completion, mail or hand deliver your completed statement to the office where you filed your declaration of candidacy. If appointed to fill a vacancy in a local elective office, file this form where your predecessor filed for office.

**PLEASE TYPE OR PRINT**

**A. IDENTIFICATION:**

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<thead>
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<th>Last Name</th>
<th>First Name</th>
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Spouse's Name

Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number

City, State, Zip Code

Home Phone

Business Phone

**B. OFFICE SOUGHT, HELD OR APPOINTED TO:**

List Name of Office

Position

District

CONTINUED ON NEXT PAGE

*Date received (Official use only)*

**Governmental Ethics Commission**

Rev. 2001
C. **OWNERSHIP INTERESTS:** List any corporation, partnership, proprietorship, trust, joint venture and every other business interest, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned within the preceding 12 months a legal or equitable interest exceeding $5,000 or 5%, whichever is less. Please attach additional pages if necessary to complete this section.
If you have nothing to report in Section "C", check here _____.

<table>
<thead>
<tr>
<th>BUSINESS NAME AND ADDRESS</th>
<th>TYPE OF BUSINESS</th>
<th>DESCRIPTION OF INTERESTS HELD</th>
<th>HELD BY WHOM</th>
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D. **GIFTS IN THE FORM OF GOODS OR SERVICES:** List any person, business or combination of businesses from which you or your spouse either individually or collectively, have received in the preceding 12 months, without reasonable and valuable consideration, goods or services having an aggregate value of $500 or more.
If you have nothing to report in Section "D", check here _____.

<table>
<thead>
<tr>
<th>NAME OF PERSON OR BUSINESS FROM WHOM GIFT RECEIVED</th>
<th>ADDRESS</th>
<th>RECEIVED BY:</th>
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E. RECEIPT OF COMPENSATION: List all places of employment in the last calendar year, and any other businesses from which you or your spouse received $2,000 or more in compensation (salary, thing of value, or economic benefit conferred on you or your spouse in return for services rendered, or to be rendered), which was reportable as taxable income on your federal income tax returns.

1. YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR.
   If you have nothing to report in Section "E"1, check here ___.

<table>
<thead>
<tr>
<th>NAME OF BUSINESS</th>
<th>ADDRESS</th>
<th>TYPE OF BUSINESS</th>
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2. SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR.
   If you have nothing to report in Section "E"2, check here ___.

<table>
<thead>
<tr>
<th>NAME OF BUSINESS</th>
<th>ADDRESS</th>
<th>TYPE OF BUSINESS</th>
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F. OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position as officer, director, associate, partner or proprietor at the time of filing, irrespective of the amount of compensation received for holding such position. Please insert additional pages if necessary to complete this section.

If you have nothing to report in Section "F", check here ___.

<table>
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<tr>
<th>BUSINESS NAME AND ADDRESS</th>
<th>POSITION HELD</th>
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**G. RECEIPT OF FEES AND COMMISSIONS:** List each client or customer who paid fees or commissions to a business or combination of businesses from which fees or commissions you or your spouse received an aggregate of $2,000 or more in the preceding calendar year. *The phrase "client or customer" relates only to businesses or the combination of businesses. In the case of a partnership, it is the partner's proportionate share of the business, and hence of the fee, which is significant, without regard to the expenses of the partnership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report under this provision. Please insert additional pages if necessary to complete this section.*

If you have nothing to report in Section "G", check here ____.

<table>
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<tr>
<th>NAME OF CLIENT / CUSTOMER</th>
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**H. DECLARATION:**

I, ____________________________, declare that this statement of substantial interests (including any accompanying pages and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of all of my substantial interests and other matters required by law. I understand that the intentional failure to file this statement as required by law or intentionally filing a false statement is a class B misdemeanor.

____________________________  ________________________________
Date                        Signature of Person Making Statement

**NUMBER OF ADDITIONAL PAGES ____**.
AFFIDAVIT OF EXEMPTION
FROM FILING RECEIPTS AND EXPENDITURES REPORTS
BY A CANDIDATE FOR COUNTY OFFICE

IF YOU ANTICIPATE RECEIVING OR EXPENDING $1,000 IN THE PRIMARY, EXCLUSIVE OF THE CANDIDATE FILING FEE, OR $1,000 IN THE GENERAL ELECTION, THIS FORM MAY NOT BE USED.

Instructions: This form may be used by any candidate for county office who qualifies for the exemption. IT MUST BE FILED WITH THE COUNTY ELECTION OFFICER, IN THE COUNTY IN WHICH THE CANDIDATE IS ON THE BALLOT, PRIOR TO July 27, 2020. If a candidate qualifies for this exemption, he or she still must appoint a treasurer or candidate committee and the treasurer must maintain the required records. (K.S.A. 25-4144) See reverse for examples.

PLEASE PRINT OR TYPE

A. Name of Candidate ____________________________

Address __________________ City __________ Zip Code __________

Home Telephone __________________ Business Telephone __________________

Office Sought __________________ District No. __________________

B. Affidavit:

State of Kansas )
County of _________________

I, __________________________________________, do swear (or affirm) that:

1. The information in Item A above is true and correct;
2. I intend to expend, contract to expend, or have expended, on my behalf an aggregate amount or value of less than one thousand dollars ($1,000) in the primary election period; and
3. I intend to receive or have received on my behalf (including amounts contributed by myself) contributions of an aggregate amount or value of less than one thousand dollars ($1,000) in the primary election period; and
4. I understand that the payment of my filing fee, or the receipt of funds to pay my filing fee, is not included in the limitations set forth in paragraphs 2 & 3; and
5. I intend to expend, contract to expend or have expended on my behalf an aggregate amount or value of less than one thousand dollars ($1,000) in the general election period; and
6. I intend to receive or have received on my behalf (including amounts contributed by myself) contributions of an aggregate amount or value of less than one thousand dollars ($1,000) in the general election period; and
7. If contributions are received or expenditures made (actual or contractual) in excess of any of the amounts set out above, I shall within three (3) days of the date of such excess file all past due Receipts and Expenditures Reports and shall file all such future reports on the dates required by K.S.A. 25-4148. (K.S.A. Supp. 25-4174)

__________________________________________ (Date)

__________________________________________ (Signature of Candidate)

Subscribed and sworn to (affirmed) before me this __________ day of ________________, 20________

__________________________________________ (Notary Public)

(Seal)

My Appointment Expires __________________, 20________
Example 1: Candidate A intends to receive contributions of less than $1,000 and make expenditures of less than $1,000 in the primary election period. Candidate A does, however, intend to receive contributions in excess of $1,000 during the general election period. He also intends to make expenditures (either actual or contractual) of more than $1,000 during the general election period. Candidate A cannot properly file the affidavit of exemption. He must file all reports at the times required by K.S.A. 25-4148.

Example 2: Candidate B meets all of the tests for exemption from filing the reports but fails to file the affidavit until after the date the first report for the primary election is due. Candidate B must file all reports since the affidavit was not filed in a timely manner.

Example 3: Candidate C intends to receive contributions and make expenditures of less than $1,000 in each the primary and general election period; however, the $1,000 limit was exceeded during the general election period. Candidate C shall within three (3) days of the date of such excess file all past due reports and shall file all such future reports on the dates required by K.S.A. 25-4148.

IF YOU HAVE ANY QUESTIONS CONCERNING THIS AFFIDAVIT, PLEASE CONTACT THE
GOVERNMENTAL ETHICS COMMISSION
901 S. Kansas Avenue
Topeka, Kansas 66612
Office (785) 296-4219
Fax (785) 296-2548
Candidate's Itemized Statement of Personal Election Contributions & Expenditures

- File this report with the Lyon County Clerk's Office within 30 days after the Primary AND General Election that you were a candidate. KSA 25-904

Name

Address

Phone

Candidate for

Election Date

Primary

General

- List the contributions over $50.00 personally received by the candidate.
- List the in-kind services and value of services
- If no contributions or expenditures are made from personal funds, the Total on this form should show zeros.

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Name &amp; Address of Contributor</th>
<th>Description of Contribution or other Receipt</th>
<th>Amount of Cash or Check</th>
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TOTAL $  

Signed: ________________________________________

DATE OF KANSAS, LYON COUNTY, ss.

Subscribed and sworn to before me this __________ day of _____________________, 20 ____________.

______________________________________________
(Officer Authorized to Administer Oath)