



**County Offices**  
(Clerk, Attorney, Register of Deeds, Sheriff and Treasurer)

Term: 4 Years

**Filing Deadline:** June 1, 2012 @ 12:00 noon for Democratic and Republican Parties. Libertarian, Reform and Americans Elect party candidates nominated by caucus or convention must have nomination papers filed by the party in the Secretary of State's office by 12:00 noon June 1, 2012 in order to appear on the general ballot. (KSA 25-202,-305)

Independent candidates must file nomination petitions by noon August 6, 2012 (K.S.A 25-305)(b)

**Must file in the Pottawatomie  
County Clerk's Office**

Filing fee is 1% of Salary, plus State fee of \$35.00

Filing by Petition: party candidates must have 3% of Party; unaffiliated candidates must have 4% of total registered voters. (Petition filing still requires the \$35 State fee)

**Candidates must file following documents to be considered and election candidate.**

1. Declaration of Intention
2. Fee of 1% of Salary OR petitions equaling required signatures, with the \$35 State Fee.  
(Fees and numbers of signature can be obtained from your County Clerk's Office)

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**Candidates are required to file the following documents when filing by FEE:**

**Filing Procedure**

***Filing by Fee for County Office:***

\_\_\_ Only Democratic and Republican primary candidates may file by fee. The filing fee is either a set amount or based on a percentage of the salary of the office the candidate is seeking. A report fee is required.

***Declaration of Intention (filing form is run by fee only)***

\_\_\_ Form is provided by and is filed with the Pottawatomie County Clerk's Office

\_\_\_ The County Clerk's Office sends a copy of the declaration to the Governmental Ethics Commissioner (GEC) for the purpose of campaign finance reporting.

***Statement of Substantial Interest***

\_\_\_ Form is provided by and is filed with the Pottawatomie County Clerk's Office

\_\_\_ Completed form is due no later than ten days after the filing deadline.

***Appointment of Treasurer Form***

\_\_\_ Form is provided by the GEC after becoming a candidate for office. You may receive Treasurers Appointment Form from the Pottawatomie County Clerk's.

\_\_\_ Candidates have ten days after becoming a candidate to appoint a treasurer and an additional ten days to file the Appointment of Treasurer Form.

\_\_\_ Completed form is filed with the Pottawatomie County Clerk's (the office will forward it to the GEC)

\_\_\_ Candidates may not take in or spend any campaign funds until the Appointment of Treasurer Form is filed.

### ***GEO Affidavit of Exemption from Filing Receipts and Expenditures Reports***

- \_\_\_ Form is provided by the GEO and mailed directly to candidate
- \_\_\_ Completed form is due nine days prior to the Primary Election
- \_\_\_ Completed form is filed with the Pottawatomie County Clerk's Office; the County office forwards a copy of the completed form to GEC
- \_\_\_ If a candidate anticipates receiving and spending less than \$500.00 in the Primary Election and anticipates receiving and spending less than an additional \$500.00 in the General Election, he/she can file an Affidavit of Exemption. This affidavit waives the need for a candidate's treasurer to file campaign Receipts and Expenditures Reports.
- \_\_\_ A candidate must appoint a treasurer and file a Appointment of Treasurer Form even if an Affidavit of Exemption is filed.

### ***Receipts and Expenditures Report***

- \_\_\_ Reporting form is provided by GEC and is mailed directly to a candidate's treasurer
  - \_\_\_ Completed reporting form is filed with the Pottawatomie County Clerk's (the office will forward it to the GEC)
- During an election cycle, three Receipts and Expenditures Reports are required for County candidates;
- (1) \_\_\_ a pre-primary election report (due July 30, 2012)
  - (2) \_\_\_ a pre-general report (due Oct. 29, 2012)
  - (3) \_\_\_ an early January wrap-up report (due Jan. 10, 2013)

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**OR**

**Candidates are required to file the following documents when filing by *PETITION*:**

### **Filing Procedure**

#### ***Filing by Petition for County Office:***

- \_\_\_ Democratic and Republican primary candidates must have signatures of 3% of the party's total registration for the county or district. A report fee of \$35 is required *KSA 25-205 (e) (3)*
- \_\_\_ Independent (or Undeclared) candidates must have signatures of 4% of the registered voters of the county or district. A report fee of \$35 is required. *KSA 25-303(c)*

#### ***PETITION (County and Township)***

- \_\_\_ A petition form included in this packet, this form may be copied
- \_\_\_ To fulfill your requirement you must have 3% of signatures of all registered voter in the party you wish to run under. Independent (or Undeclared) Candidates 4% of the qualified voters of the district as certified by the county election officer to the SOS.
- \_\_\_ No person may sign more than one petition per office or sign any one candidates petition more than once.
- \_\_\_ Each person must sign their signature, print their name, list their address, list their city and date the petition. In order for the signature to be valid the name must be signed as it reads on the current voter registration books.
- \_\_\_ The signers address must be within the jurisdiction of the candidates running for office. If different than the voter registration records the person must be identifiable in some other manner.
- \_\_\_ The petition sheets cannot be cut or pasted in any manner.
- \_\_\_ The circulator of the petition must complete the affidavit of circulator, and must be a valid registered voter
- \_\_\_ It is always a good idea to get more signature than required in case some signature are not valid
- \_\_\_ All documents constituting the petition must be field at the same time in the Office of the Pottawatomie County Clerk

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# 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:  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.

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

Signature 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)

Attestation signature box

**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:**

Last Name	First Name	MI
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Spouse's Name
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Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number
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City, State, Zip Code
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Home Phone	Business Phone
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**B. OFFICE SOUGHT, HELD OR APPOINTED TO:**

List Name of Office
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Position	District
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CONTINUED ON NEXT PAGE

<i>Date received (Official use only)</i>
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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 \_\_\_\_.

	BUSINESS NAME AND ADDRESS	TYPE OF BUSINESS	DESCRIPTION OF INTERESTS HELD	HELD BY WHOM
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

**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 \_\_\_\_.

	NAME OF PERSON OR BUSINESS FROM WHOM GIFT RECEIVED	ADDRESS	RECEIVED BY:
1.			
2.			
3.			

**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 \_\_\_\_.

	NAME OF BUSINESS		ADDRESS	TYPE OF BUSINESS
1.				
2.				

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 \_\_\_\_.

	NAME OF BUSINESS		ADDRESS	TYPE OF BUSINESS
1.				
2.				

**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 \_\_\_\_.

	BUSINESS NAME AND ADDRESS		POSITION HELD	HELD BY WHOM
1.				
2.				
3.				
4.				
5.				

**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 \_\_\_\_.

	NAME OF CLIENT / CUSTOMER	ADDRESS	RECEIVED BY
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

**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 \_\_\_\_\_.

**APPOINTMENT OF  
TREASURER OR CANDIDATE COMMITTEE FORM  
FOR CANDIDATE FOR LOCAL OFFICE**

This is an (Check one)  Initial Appointment  Amended Statement

**CANDIDATE** (Please Type or Print)

Name		
Street		
City	County	Zip Code
Home Telephone	Business Telephone	
Office Sought	District No.	

**TREASURER**

Date Appointed		
Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	

**OR CANDIDATE COMMITTEE**

Date Appointed		
Chairperson's Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	
Treasurer's Name		
Address		
City	Zip Code	
Home Telephone	Business Telephone	

**SIGNATURE**

**" I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."**

\_\_\_\_\_ (Date)

\_\_\_\_\_ (Signature of Candidate)

**SEE REVERSE SIDE FOR INSTRUCTIONS**

Office of the Kansas Secretary of State  
**Kansas Primary Nomination Petition**  
 DOWNLOAD THIS FORM AT WWW.SOS.KS.GOV



**Nominee Information**

Name \_\_\_\_\_  
 Residential Address \_\_\_\_\_ City \_\_\_\_\_  
 Office Sought \_\_\_\_\_ District No. (if applicable) \_\_\_\_\_

**Nomination**

I, the undersigned, an elector of the appropriate election district, county of \_\_\_\_\_ and state of Kansas, and a duly registered voter, and a member of the \_\_\_\_\_ Party, hereby nominate the candidate herein named to be voted for at the primary election to be held on the first Tuesday in August in the year \_\_\_\_\_, as representing the principles of such party; and I further declare that I intend to support the candidate and that I have not signed and will not sign any nomination petition for any other person, for such office at such primary election.

	Print Name	Signature	Street Number or Rural Route (as registered)	City	Date
1	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____
8	_____	_____	_____	_____	_____
9	_____	_____	_____	_____	_____
10	_____	_____	_____	_____	_____
11	_____	_____	_____	_____	_____
12	_____	_____	_____	_____	_____
13	_____	_____	_____	_____	_____
14	_____	_____	_____	_____	_____
15	_____	_____	_____	_____	_____

Office of the Kansas Secretary of State  
**Affidavit of Petition Circulator**

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**Circulator Information**

Last Name		First Name		Middle Name	
Residential Address		City	State	Zip	

- Select one:
- I am a resident of the state of Kansas who has the qualifications of an elector of the state of Kansas.
  - I am the candidate.

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**Signature**

I, being duly sworn, personally witnessed the signing of this petition by each person whose name appears herein.

Subscribed and sworn to before me this \_\_\_\_ of \_\_\_\_  
Day Month Year

Person Authorized to Administer Oaths

My appointment expires in \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Month Day Year

**AFFIDAVIT OF EXEMPTION  
FROM FILING RECEIPTS AND EXPENDITURES REPORTS  
BY A CANDIDATE FOR COUNTY OFFICE**

IF YOU ANTICIPATE RECEIVING OR EXPENDING \$500 IN THE PRIMARY, EXCLUSIVE OF THE CANDIDATE FILING FEE, OR \$500 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 26, 2010.** 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 five hundred dollars (\$500) 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 five hundred dollars (\$500) 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 five hundred dollars (\$500) 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 five hundred dollars (\$500) 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. 25-4174)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Candidate)

Subscribed and sworn to (affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
(Notary Public)

( Seal )

My Appointment Expires \_\_\_\_\_, 20 \_\_\_\_\_