

Affidavit of petition circulator

STATE OF KANSAS

COUNTY OF _____

Marion

} ss.

I, _____ ,

Print Name

(check one):

a resident of the state of Kansas who has the qualifications of an elector of the state of Kansas, or

the candidate,

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

Signature of above named circulator

Address of above named circulator

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

(SEAL)

Person authorized to administer oaths

My appointment expires _____ , 20 ____ .