CANDIDATE FILING FORM

For Board of Trustees to Sanitary & Improvement District #2

State of _____)

) .ss County of)			
FILING DEADLINE:	July 2	1, 2025 at 5:00 p.n	n.
I, the undersigned, residing atStreet		City	and State
Zip Code , County hereby request that my name be placed	on the officia	I ballot for the election to be I	neld <u>September 9, 2025</u>
as follows:Print name as it is to appear on the b	pallot and name	e of entity represented, if any	······································
I am a qualified candidate for the office of Board of Trustees September 14, 2027.	to Sanitary	& Improvement District	#2, for a term ending
I HEREBY SWEAR THAT I WILL ABIDE BY THE LAWS RESULTS OF THE ELECTIONS, THAT I AM QUALIFIE ELECTED.			
IN WITNESS WHEREOF, I have hereunto subscribed my name this _	c (day)	lay of(month)	,(year)
		Signature of Candid	ate
Candidate's email address		Candidate's telephone number	
Subscribed in my presence and sworn to before me this(day)	day of	(month)	(year)
(SEAL)		Notary Public	
	Mv Comr	ssion expires:	

COMPLETED FORM MUST BE RECEIVED BY 5:00 P.M. ON July 21, 2025. MAIL THIS COMPLETED ORIGINAL FORM TO *JOANN M. FISCHER, KNOX COUNTY CLERK, PO BOX 166, CENTER NE 68724*. CALL 402-288-5604 OR EMAIL <u>clerk@knoxcountyne.gov</u> IF YOU HAVE ANY QUESTIONS.