

VOTER REGISTRATION FORM

Southwest Kansas Groundwater Management District #3
2009 E. Spruce Street
Garden City, Kansas 67846
620-275-7147

MUST BE RETURNED TO DISTRICT OFFICE BY 5 P.M., 5 DAYS BEFORE ANNUAL MEETING

Name _____
(Please Print)

Address _____

City _____ State _____ Zip _____

Pursuant to K.S.A. 82a-1021, I certify that I am an eligible voter of the district by being the age of Eighteen (18) or upward and qualify by means of one of the following criterion and the other provisions of this law.

- I am a natural person who is a landowner who owns, of record, any land, or any Interest in land, comprising forty (40) or more contiguous acres (not excluded from assessment) located within the boundaries of the district and not within the corporate limits of any municipality.

- I am a natural person who withdraws or uses groundwater (not excluded from Assessment) from within the boundaries of the district in an amount of one acre-foot or more per year.

SIGNATURE _____

DATE _____