



WATER DISTRICT No. 7
 JOHNSON COUNTY, KANSAS
 534 W. Main • P.O. Box 7 • Gardner, KS 66030-0007
 O: 913.856.7375 • F: 913.856.7173 • www.water7.com

MAIL-IN BALLOT FOR RURAL WATER DISTRICT NO. 7 BOARD OF DIRECTORS

On January 14, 2025, the Board of Directors adopted the following three (3) District patrons (listed below) as nominees for board member positions that will be open on March 31, 2025, at the District’s Annual Meeting. As a participating member you may vote for up to three nominees. The three nominees receiving the most votes will be elected at the annual meeting to a three-year term. Write in nominations are allowed; however, they must also meet the criteria as defined by the District’s By-laws (www.water7.com/bylaws/). Some additional information:

- This ballot is intended to be printed off and completed.
- The ballot must be signed by the “participating member”, as defined by the District By-Laws.
- The ballot must be postmarked and mailed to the District at least 10 days prior to the annual meeting; further, in no case will the ballot be counted if received after.
- Write-in candidates are allowed.
- Drop off ballots are not accepted.
- Any participating member not submitting a mail-in ballot may cast a vote at the annual meeting.
- Additional information can be found at www.water7.com/bylaws/.

NOMINEE’S BY BOARD OF DIRECTORS	OCCUPATION:	MARK HERE (UP TO 3 TOTAL)
Gary Duggan	Retired Military/Carpenter	<input type="checkbox"/>
Mary Nelson	Commercial Lender	<input type="checkbox"/>
Dennis Carlson	Residential Real Estate Appraiser	<input type="checkbox"/>
Write In Candidate	_____	<input type="checkbox"/>
Write In Candidate	_____	<input type="checkbox"/>

If you have any questions regarding this voting form please contact Water District No. 7 at 913-856-7375 or email District Manager, Allan Soetaert at asoetaert@water7.com. A copy of the Rules and Regulations and District By-laws are available on the District website: www.water7.com. You may also request a written copy by contacting the office.

Votes must be signed by a participating member of Rural Water District No. 7.

SIGNATURE OF PARTICIPATING MEMBER:	
PRINTED NAME:	
DATE:	
ACCOUNT/BENEFIT UNIT NUMBER:	

TO BE COMPLETED BY THE DISTRICT OFFICE

Benefit Unit # _____
 Landowner Yes No

Date _____
 Received _____
 Employee Initials _____

Recorded
 Employee Initials _____