



2017 KS Municipal Candidate Screening Questionnaire
Please return to info@gkcwpc.org

Name:
Address:

Phone:
Email:

**You may prepare your answers in a document to respond to the questions.
Please number your responses accordingly.**

1. What office are you running for and what are the reasons you are running? Are you an incumbent?

2. What qualifications and background experience do you have that will contribute to your success?

3. How much money have you raised? How much is your budget?

4. What do you see as the top 3 challenges facing your community or school district in the next 5 years? What solutions do you offer to those challenges?

5. Do you support local funding for family planning services?

6. What are your thoughts on local control and recent decisions by the Kansas legislature to over-rule local authority such as on concealed carry in public buildings and enact a tax lid on municipalities?

7. Do you support a woman's right to medically safe, legal abortion?

8. Do you support passage of the Equal Rights Amendment?

9. Are you seeking the endorsement of the GKCWPC?

*Please return completed questionnaire
via email: info@gkcwpc.org*