DECLARATION OF CANDIDACY FOR PRECINCT COMMITTEEMAN OR STATE CONVENTION DELEGATE IN 2016

(CAN-37)

State Form 47417 (R11 / 9-15)
Indiana Election Division (IC 3-8-1-32; IC 3-8-2-7)

INSTRUCTIONS: This form is used by Democratic and Republican Party candidates for Precinct Committeeman and State Convention Delegate. A declaration of candidacy for election as a precinct committeeman or state convention delegate must be filed with the county election board *or Lake or Tippecanoe County boards of elections and registration* **no earlier than January 6, 2016 and no later than noon, February 5, 2016.** ***If running for BOTH precinct committeeman and state convention delegate, complete a separate copy of the CAN-37 for each office.***

STATE OF INDIANA)
COUNTY OF HOWARD)

FILED
FEB 04 2016
KIM WILSON
Clerk Howard Cir. Court

GENERAL INFORMATION

I, MICHAEL H. KARICKHOFF (Name of Candidate) the undersigned, certify the following:

(1) I am a registered voter of Precinct 604 of the Township of CENTER (or of Ward _____ of the City or Town of Kokomo), County of HOWARD, State of Indiana.

(2) I reside in the 4th Congressional district.

(3) I request that my name be placed on the May 3, 2016 primary ballot of the party with which I am affiliated:

(check one) ☐ Democratic Party or ☒ Republican Party

for the office of ☐ Precinct Committeeman OR ☒ State Convention Delegate *(check only one office on this copy)*

Precinct Name _____ *or* Convention Delegate District/"At Large" AT LARGE

(4) I comply with all requirements under the laws of the State of Indiana and any candidate requirements set by my party's rules to be a candidate for this office.

RESIDENCY INFORMATION

(5) My complete residence address is:

2504 GREENTREE LANE — Kokomo, Indiana 46902
Complete Residence Address Must Be Inserted — City — ZIP Code

(6) My mailing address is *(if different from residence address)*:

_____ — _____, Indiana _____
Mailing Address *(Write "SAME" if both addresses are identical or leave blank)* — City — ZIP Code

CANDIDATE NAME INFORMATION

I request that my name appear on the primary election ballot in the following manner:

MIKE KARICKHOFF
(Include any Nickname and/or Suffix, Jr. Sr. II III IV)

I also request that my name on my voter registration record be the same as the name on this declaration of candidacy.
The candidate's name must comply with the requirements in Indiana Code 3-5-7. If a candidate's name does not comply with this state law, the declaration may be challenged under Indiana Code 3-8-1-2.
*A candidate may use a nickname on the ballot only if the nickname is a name by which the candidate is commonly known and does not exceed 20 characters.
EXAMPLE: John R. (Jack) Doe A candidate may not use a title or degree as a designation or a designation that implies a title or degree.

CERTIFICATION

I, the undersigned, certify that the information in this Declaration of Candidacy is true and complete, and that I meet the specific requirements of this office.

Signature	Date signed *(MM/DD/YY)*	Telephone *(Day)*	Telephone *(Evening)*
[signature]	2/4/2016	(765) 860-7160	(765) 860-7160

STATE OF Indiana)
COUNTY OF Howard)

Subscribed and sworn to before me this 4 day of February, 2016.

Kim Wilson
Notary Public or Other Official Administering Oath according to IC 33-42-4-1

My Commission expires *(applies only to Notary Public)*: 12-31-18

County of Residence: Howard

SEAL