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Dearborn

(CAN-2)



DECLARATION OF CANDIDACY FOR PRIMARY NOMINATION
State Form 46439 (R8/12-05)
Indiana Election Commission (IC 3-8-2-7)

INSTRUCTIONS: This form is used by an individual who is seeking the Democratic or Republican party nomination to an elected office in a primary election. A declaration of candidacy must be filed no later than noon, February 17, 2006 and no earlier than January 18, 2006. Please print or type all information on this form except all signatures. SEE IMPORTANT INFORMATION ON BACK OF FORM. Candidates seeking a statewide office in a primary election file a CAN-14 form. Candidates seeking a nomination in a municipal election year file CAN-42 form.

FILED

STATE OF INDIANA
COUNTY OF DEARBORN

FEB 14 2006 *Cong #6*

GENERAL INFORMATION

I, FRANK AARON NEGANWALD the undersigned, certify the following:
Name of Candidate

Philip D. Wilson
CLERK OF DEARBORN CIRCUIT COURT

(1) I am a registered voter of Precinct 2 of the Township of Harrison (or of Ward _____)
of the City or Town of _____, County of _____, State of Indiana.

(2) I request that my name be placed on the official primary ballot of the party with which I am affiliated (check one box)
 Democratic Party or the Republican Party for the office of DELEGATE, District 1 (if any)
to be voted on at the primary election to be held on May 2, 2006.

(3) I understand that I must be affiliated with the political party indicated above to be eligible for nomination as a candidate of that party in this primary election. I understand that my party affiliation is determined by which party I voted for in the last Indiana primary election in which I voted, or I have not voted in an Indiana primary election, by my own affirmation. I understand that if I cannot meet the party affiliation requirement by either of those tests, I must obtain and file a certificate from the appropriate county chairman of the party indicating that I am a member of this political party. I meet the requirement to be affiliated with the political party indicated because (check one):

- The most recent primary election in which I voted was the primary held by the party with which I claim affiliation above.
- I have never voted in a primary election, and claim affiliation with the party indicated above.
- The county chairman of the county in which I reside, and of the political party with which I claim affiliation above, has certified that I am a member of the political party. (I have attached a copy of the county chairman's certification to this form.)

(4) (This paragraph does not apply to a candidate for federal office.) I comply with all requirements under the laws of the State of Indiana to be a candidate for this office including any applicable residency requirement. I am not ineligible to be a candidate due to a criminal conviction that would prohibit me from serving in this office.

RESIDENCY INFORMATION

(5) My complete residence address is:
24568 Lela Drive Lawrenceburg, Indiana 47025
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:
AARON NEGANWALD
(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, and that a copy of this form be forwarded to the county voter registration office for any necessary change.
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 3-5-1-2.
*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] 2/14/2006 (812) 584-5995 (412) 637-3161
Signature Date Signed (MM/DD/YY) Telephone (Day) Telephone (Evening)

↓ Please complete reverse of form ↓

RECEIVED
INDIANA ELECTIONS DIVISION
2006 FEB 14 PM 1:5

FILED
(CAN-2)
JAN 25 2006



DECLARATION OF CANDIDACY FOR PRIMARY NOMINATION
State Form 46439 (R8/12-05)
Indiana Election Commission (IC 3-8-2-7)

INSTRUCTIONS: This form is used by an individual who is seeking the Democratic or Republican party nomination to a primary election. A declaration of candidacy must be filed no later than noon, February 17, 2006 and no earlier than January 18, 2006. Please print clearly. **CLERK OF DEARBORN COUNTY COURT** This form except all signatures SEE IMPORTANT INFORMATION ON BACK OF FORM. Candidates seeking a statewide office in a primary election file a CAN-14 form. Candidates seeking a primary nomination in a municipal election year file CAN-42 form.

STATE OF INDIANA
COUNTY OF DEARBORN

Cong # 4

GENERAL INFORMATION

ARTHUR LITTLE the undersigned, certify the following:
Name of Candidate

(1) I am a registered voter of Precinct 2 of the Township of MILLER (or of Ward _____)
of the City or Town of LAWRENCEBURG, County of JND, State of Indiana.

(2) I request that my name be placed on the official primary ballot of the party with which I am affiliated (check one box)
 Democratic Party or the Republican Party for the office of STATE DELEGATE, District 1 (if any)
to be voted on at the primary election to be held on May 2, 2006

(3) I understand that I must be affiliated with the political party indicated above to be eligible for nomination as a candidate of that party in this primary election. I understand that my party affiliation is determined by which party I voted for in the last Indiana primary election in which I voted, or if I have not voted in an Indiana primary election, by my own affirmation. I understand that if I cannot meet the party affiliation requirement by either of those tests I must obtain and file a certificate from the appropriate county chairman of the party indicating that I am a member of this political party. I meet the requirement to be affiliated with the political party indicated because (check one):

- The most recent primary election in which I voted was the primary held by the party with which I claim affiliation above.
- I have never voted in a primary election, and claim affiliation with the party indicated above.
- The county chairman of the county in which I reside, and of the political party with which I claim affiliation above, has certified that I am a member of the political party. (I have attached a copy of the county chairman's certification to this form.)

(4) (This paragraph does not apply to a candidate for federal office.) I comply with all requirements under the laws of the State of Indiana to be a candidate for this office including any applicable residency requirement. I am not ineligible to be a candidate due to a criminal conviction that would prohibit me from serving in this office.

RESIDENCY INFORMATION

(5) My complete residence address is:
2297 STATE LINE RD LAWRENCEBURG, Indiana 47025
Complete Residence Address Must Be Inserted City ZIP Code

(6) My mailing address is (If different from residence address):
SAME, 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:

ARTHUR LITTLE
(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, and that a copy of this form be forwarded to the county voter registration office for any necessary change.
The candidate's name must comply with the requirements in Indiana Code 3-6-7. 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.

Arthur Little 1/25/06 (912) 637-1258 SAME
Signature Date Signed (MM/DD/YY) Telephone (Day) Telephone (Evening)

↓ Please complete reverse of form ↓



DECLARATION OF CANDIDACY FOR PRIMARY NOMINATION

State Form 46439 (R8/12-05)
Indiana Election Commission (IC 3-8-2-7)

(CAN-2)

INSTRUCTIONS: This form is used by an individual who is seeking the Democratic or Republican party nomination to an elected office in a primary election. A declaration of candidacy must be filed no later than noon, February 17, 2006 and no earlier than January 18, 2006. Please print or type all information on this form except all signatures. SEE IMPORTANT INFORMATION ON BACK OF FORM. Candidates seeking a statewide office in a primary election file a CAN-14 form. Candidates seeking a primary nomination in a municipal election year file CAN-42 form.

STATE OF INDIANA
COUNTY OF DEARBORN

FILED Cong. #9

GENERAL INFORMATION

FEB 14 2006

I, Lynn M. Deddens the undersigned, certify the following:
Name of Candidate

Sherry D. Warner
CLERK OF DEARBORN CIRCUIT COURT
(or of Ward)

(1) I am a registered voter of Precinct _____ of the Township of JACKSON
of the City or Town of _____, County of DEARBORN, State of Indiana.

(2) I request that my name be placed on the official primary ballot of the party with which I am affiliated (check one box) Delegate
 Democratic Party or the Republican Party for the office of Republican State Convention District 4 (if any)
to be voted on at the primary election to be held on May 2, 2006.

(3) I understand that I must be affiliated with the political party indicated above to be eligible for nomination as a candidate of that party in this primary election. I understand that my party affiliation is determined by which party I voted for in the last Indiana primary election in which I voted, or if I have not voted in an Indiana primary election, by my own affirmation. I understand that if I cannot meet the party affiliation requirement by either of those tests, I must obtain and file a certificate from the appropriate county chairman of the party indicating that I am a member of this political party. I meet the requirement to be affiliated with the political party indicated because (check one):

The most recent primary election in which I voted was the primary held by the party with which I claim affiliation above.

I have never voted in a primary election, and claim affiliation with the party indicated above.

The county chairman of the county in which I reside, and of the political party with which I claim affiliation above, has certified that I am a member of the political party. (I have attached a copy of the county chairman's certification to this form.)

(4) (This paragraph does not apply to a candidate for federal office.) I comply with all requirements under the laws of the State of Indiana to be a candidate for this office including any applicable residency requirement. I am not ineligible to be a candidate due to a criminal conviction that would prohibit me from serving in this office.

RESIDENCY INFORMATION

(5) My complete residence address is:

12013 Five Points Rd., SUNMAN, Indiana 47041
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:

Lynn M. Deddens
(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, and that a copy of this form be forwarded to the county voter registration office for any necessary change.

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.

Lynn M. Deddens 02/14/06 812, 532-3211 (812) 623-5906
Signature Date Signed (MM/DD/YY) Telephone (Day) Telephone (Evening)

↓ Please complete reverse of form ↓



DECLARATION OF CANDIDACY FOR PRIMARY NOMINATION

State Form 48439 (R8/12-05)
Indiana Election Commission (IC 3-8-2-7)

(CAN-2)

INSTRUCTIONS: This form is used by an individual who is seeking the Democratic or Republican party nomination to an elected office in a primary election. A declaration of candidacy must be filed no later than noon, February 17, 2006 and no earlier than January 18, 2006. Please print or type all information on this form except all signatures. SEE IMPORTANT INFORMATION ON BACK OF FORM. Candidates seeking a statewide office in a primary election file a CAN-14 form. Candidates seeking a primary nomination in a municipal election year file CAN-42 form.

FILED

STATE OF INDIANA
COUNTY OF DEARBORN

JAN 23 2006
Cory #9

GENERAL INFORMATION

I, Jonathan N. Cleary the undersigned, certify the following:
Name of Candidate

Walter D. Whelan
CLERK OF DEARBORN CIRCUIT COURT

(1) I am a registered voter of Precinct 1 of the Township of Kelso
of the City or Town of _____, County of Dearborn State of Indiana.

(2) I request that my name be placed on the official primary ballot of the party with which I am affiliated. (check one box)
 Democratic Party or the Republican Party for the office of Delegate to the State District Kelso 1 (if any)
to be voted on at the primary election to be held on May 2, 2006.
Convention - District 4

(3) I understand that I must be affiliated with the political party indicated above to be eligible for nomination as a candidate of that party in this primary election. I understand that my party affiliation is determined by which party I voted for in the last Indiana primary election in which I voted, or if I have not voted in an Indiana primary election, by my own affirmation. I understand that if I cannot meet the party affiliation requirement by either of those tests I must obtain and file a certificate from the appropriate county chairman of the party indicating that I am a member of this political party. I meet the requirement to be affiliated with the political party indicated because (check one):

- The most recent primary election in which I voted was the primary held by the party with which I claim affiliation above.
- I have never voted in a primary election, and claim affiliation with the party indicated above.
- The county chairman of the county in which I reside, and of the political party with which I claim affiliation above, has certified that I am a member of the political party. (I have attached a copy of the county chairman's certification to this form.)

(4) (This paragraph does not apply to a candidate for federal office.) I comply with all requirements under the laws of the State of Indiana to be a candidate for this office including any applicable residency requirement. I am not ineligible to be a candidate due to a criminal conviction that would prohibit me from serving in this office.

RESIDENCY INFORMATION

(5) My complete residence address is:
29263 St. Joe Dr. W. Harrison, Indiana 47060
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:

Jonathan N. Cleary
(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, and that a copy of this form be forwarded to the county voter registration office for any necessary change.
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 or 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.

Jonathan N. Cleary 01/24/2006 (Date Signed) 532-2689 (Telephone Day) 576-5021 (Telephone Evening)
Signature

Please complete reverse of form



DECLARATION OF CANDIDACY FOR PRIMARY NOMINATION

State Form 48439 (R8/12-05)
Indiana Election Commission (IC 3-8-2-7)

(CAN-2)

Craig #6

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FILED

JAN 25 2006

STATE OF INDIANA
COUNTY OF Dearborn

GENERAL INFORMATION

Phillip D. W...
CLERK OF DEARBORN CIRCUIT COURT

I, Gary Morris the undersigned, certify the following:
Name of Candidate

(1) I am a registered voter of Precinct Miller 4 of the Township of Miller (or of Ward _____) of the City or Town of Bright/Lawrenceburg, County of Dearborn, State of Indiana.

(2) I request that my name be placed on the official primary ballot of the party with which I am affiliated (check one box)
 Democratic Party or the Republican Party for the office of Republican State Convention Delegate, District _____ County at Large _____ (if any) to be voted on at the primary election to be held on May 2, 2006.

(3) I understand that I must be affiliated with the political party indicated above to be eligible for nomination as a candidate of that party in this primary election. I understand that my party affiliation is determined by which party I voted for in the last Indiana primary election in which I voted, or if I have not voted in an Indiana primary election, by my own affirmation. I understand that if I cannot meet the party affiliation requirement by either of those tests, I must obtain and file a certificate from the appropriate county chairman of the party indicating that I am a member of this political party. I meet the requirement to be affiliated with the political party indicated because (check one):

- The most recent primary election in which I voted was the primary held by the party with which I claim affiliation above
- I have never voted in a primary election, and claim affiliation with the party indicated above
- The county chairman of the county in which I reside, and of the political party with which I claim affiliation above, has certified that I am a member of the political party. (I have attached a copy of the county chairman's certification to this form.)

(4) (This paragraph does not apply to a candidate for federal office.) I comply with all requirements under the laws of the State of Indiana to be a candidate for this office including any applicable residency requirement. I am not ineligible to be a candidate due to a criminal conviction that would prohibit me from serving in this office.

RESIDENCY INFORMATION

(5) My complete residence address is:
23706 Mountain Meadows Drive Lawrenceburg Indiana 47025
Complete Residence Address Must Be Inserted City ZIP Code

(6) My mailing address is (if different from residence address):
Mailing Address (Write "SAME" if both addresses are identical or leave blank) City Indiana ZIP Code

CANDIDATE NAME INFORMATION

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

(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, and that a copy of this form be forwarded to the county voter registration office for any necessary change.

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.

Gary Morris 1/25/2006 (812) 537-4855 (812) 637-0522
Signature Date Signed (MM/DD/YY) Telephone (Day) Telephone (Evening)

↓ Please complete reverse of form ↓