STATEMENT OF ECONOMIC INTERESTS FOR LOCAL AND SCHOOL BOARD OFFICES

State Form 55128 (11-12)
Indiana Election Commission (IC 3-8-9)

INSTRUCTIONS: This statement must be filed with a candidate’s: (1) declaration of candidacy for nomination at a primary or town party convention; (2) petition of nomination as a school board candidate; (3) petition of nomination as a minor party or independent candidate; (4) declaration of intent to be a write-in candidate; or (5) certificate of candidate selection to fill an early or late vacancy on a general or municipal election ballot. This statement must also be filed no later than noon 60 days after an individual assumes a vacant local office.

STATE OF INDIANA
COUNTY OF ___________________________________

INFORMATION FOR THE CALENDAR YEAR BEFORE THE DATE OF THIS FILING:

20___

NOTE: Insert “Not Applicable” where appropriate.

I, ___________________________________________________________ the undersigned, certify the following:

Name of Candidate or Person Filling Vacant Office

(1) The elected office which I seek as a candidate, or to which I have been appointed to fill a vacancy is ___________________________________________________________. (Include district, if applicable.)

(2) The name of my spouse is ___________________________________________________________.

(3) The name of my employer and the nature of its business is ___________________________________________________________.

(4) The name of the employer of my spouse and the nature of its business is ___________________________________________________________.

(5) If I own a sole proprietorship, the name of the sole proprietorship and the nature of its business is ___________________________________________________________.

(6) If I operate a professional practice, the name of the professional practice and the nature of its business is ___________________________________________________________.

(7) If I am a member of a partnership, the name of the partnership and the nature of its business is ___________________________________________________________.

(8) If my spouse is a member of a partnership, the name of the partnership and the nature of its business is ___________________________________________________________.

(9) If I am a member of a limited liability company, the name of the limited liability company and the nature of its business is ___________________________________________________________.

(10) If my spouse is a member of a limited liability company, the name of the limited liability company and the nature of its business is ___________________________________________________________.

(11) If I am an officer or a director of a corporation (other than a church), the name of the corporation and the nature of its business is ___________________________________________________________.

(12) If my spouse is an officer or a director of a corporation (other than a church), the name of the corporation and the nature of its business is ___________________________________________________________.

COMPLETE THE AFFIRMATION ON REVERSE SIDE OF THIS FORM.
I, the undersigned, affirm that the information set forth on this Statement of Economic Interests is true and complete.

Signed, this the _____ day of _________________________________, 20__:

_______________________________________________________________
Signature

_______________________________________________________________
Printed Name

STATE OF ________________________________ )
COUNTY OF ________________________________ )
Subscribed and affirmed to before me this ________ day of _____________________________, 20__.

Notary Public or Other Official Administering Oath

My Commission expires (applies only to Notary Public): ______________________________

County of Residence: ______________________________________________________