

## DECLARATION OF INTENT TO BE A WRITE-IN CANDIDATE IN 2020

State Form 46438 (R20 / 8-19)

Indiana Election Division (IC 3-8-2-2.5; 3-8-2-4(b))

## INSTRUCTIONS:

A declaration of intent to be a write-in candidate in the general election must be filed: (1) not earlier than January 8, 2020; and (2) not later than NOON, July 6, 2020. Please print or type all information on this form except all signatures. All declared write-in candidates for election to a LOCAL office (except for circuit, probate, or superior court judge, or prosecuting attorney) must file the CAN-12 form WITH this form. SEE IMPORTANT INFORMATION ON BACK OF FORM.

)

(CAN-3)

STATE OF INDIANA

COUNTY OF \_\_\_\_\_

GENERAL INFORMATION					
	the under	signed, certify the following:			
Name of Candidate					
(1) I am a registered voter of Precinct of the Township of			,		
(or of Ward, <i>if applicable</i> , of the City	or Town of	), County of	, State of Indiana		
(amend if other state).					
<ul> <li>(2) I am (check one box and enter name of any app</li> <li>an independent candidate (not affiliated with any p</li> <li>affiliated with a party OTHER THAN the Democra</li> <li>Party.</li> </ul>	party); OR	epublican Party, namely the			
(3) I declare my intention to be a write-in candida	te for the office of	, District	(if any)		
to be voted on at the general election to be held on N	lovember 3, 2020.				
(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 residence requirements. I am not ineligible to be a candidate due to a criminal conviction that would prohibit me from serving in this office.					
(5) (This paragraph applies to a candidate for President or Vice-President of the United States.) I have attached a statement declaring the names of the individuals who have consented and are eligible to be my candidates for presidential electors.					

(6) My complete residence address is:	CY INFORMATION		
		mend if other state)	
Complete residence address must be inserted	City	ZIP Code	
(7) My mailing address is (Write address if mailing address is different f	rom residence address; write "SAME"	if both addresses are identical):	
	,IN (amend if other state)		
Mailing address	City	ZIP Code	

## CANDIDATE NAME INFORMATION

I request my name appear in the following manner:\_

I request that my name as set forth above appear on the certified list of write-in candidates. I also request that the 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.

Please complete reverse of form.

	CANDIDATE CERTIFICATIO	ON			
(8) ( <i>This paragraph <u>does not</u> apply to federal offices</i> economic interest statement, file stamped by the off this statement of economic interest has been filed. (	fice required to receive the stat				
(9) (This paragraph does not apply to a candidate for federal office or state legislative office) By initialing, I acknowledge that I might be required to file a surety bond before serving in office. (initial here)					
(10) ( <i>This paragraph <u>does not</u> apply for candidates for fare a sequence of the sequence of t</i>			I acknowledge that I might be		
(11) ( <i>This paragraph <u>does not</u> apply to a candidate for for</i> By initialing, I acknowledge that I: am aware of the prov and expenditures, and agree to comply with the provision	visions of IC 3-9 regarding campa	ign finance and the reporting of	campaign finance contributions		
<ul> <li>(12) I have been a candidate for state, state legislative, or local office in a previous primary, municipal, special, or general election:</li> <li>☐ Yes ☐ No (Check one)</li> <li>(If the answer to this question is no, skip paragraph 13 and proceed to paragraph 14.)</li> </ul>					
(13) I have filed all reports required by IC 3-9-5-10 for al	Il previous candidacies: 🔲 Yes	□ No (Check one)			
(14) (This paragraph applies only to a candidate for a lo if the local office receives compensation of less than \$5, statement of organization for my principal candidate's of the campaign finance statement of organization not late	,000 but the candidate raises or s ommittee with the appropriate cou or than noon, seven (7) days after	pends more than \$500.) I have inty election board <b>OR</b> I am awa the final date to file this declara	filed a campaign finance are that I may be required to file tion of candidacy. <i>(initial here)</i>		
I certify that the information in this Declaration of Candidacy is true and complete, and that I meet the specific requirements of this office.					
	// (	) ( (	) Telephone <i>(Evening)</i>		
Signature	-		relephone (Evening)		
OPTIONAL INFORMATION: Candidate's e-mail address:	U	Campaign website address:			
STATE OF	)				
COUNTY OF	) )		$\frown$		
Subscribed and sworn to before me this day of	f	, 2020.	SEAL		
Notary Public or Other Official Administering Oath accord	ling to IC 33-42-9				
My Commission expires (applies only to Notary Public): _					
County of Residence:					
-A candidate's committee of a write-in candidate must file a cam state legislative office) or with the appropriate county election bo - A candidate's committee must file a pre-election campaign fina legislative office) or with the appropriate county election board (i -The candidate's committee must also file a pre-election suppler more during the period beginning October 10, 2020 and ending such contribution is received, the candidate's committee is not r -A person who fails to file a report with the Indiana Election Divis afternoon of the final date for filing the report being calculated a documented by the Election Division or county election board. <b>N</b>	oard (if a candidate for a local office). ance report no later than NOON, Octob if a candidate for a local office). mental report no later than forty-eight ( at 6:00 a.m. on November 1, 2020, wi equired to file a supplemental report. sion or a county election board is subj s the first day, for a maximum penalty	ON, July 24, 2020, with the Indiana I per 16, 2020, with the Indiana Election (48) hours after the committee receiven th the Indiana Election Division or appression of the ect to a civil penalty of \$50 for each of of not more than \$1,000, plus any in	on Division (if a candidate for a state ves any contribution of \$1,000 or opropriate county election board. If no day the report is late, with the vestigative costs incurred and		
NOTE TO CANDIDATES FOR STATEWIDE OFFICE:					
A candidate's committee must file "quarterly" campaign finance electronically, and are subject to the same civil penalties set for further information. The committee must file quarterly reports no later than noon, In (1) April 15, 2020, covering the period from January 1, 2 (2) July 15, 2020, covering the period from April 1, 2020 (3) October 15, 2020, covering the period from July 1, 2 (4) October 27, 2020, covering the period from October (5) January 20, 2021, covering the period from October	th in the Campaign Finance Notice abo dianapolis time: 2020 through March 31, 2020. 0 through June 30, 2020. 2020 through September 30, 2020. 1, 2020 through October 19, 2020.	ove. Contact the Campaign Finance			
The candidate's committee must also file supplemental reports from a person that total \$1,000 or more during the reporting per supplemental report.	<b>.</b>				
			nittee is not required to file a		
<ol> <li>Supplemental Reporting Period: April 1, 2020, throu</li> <li>Supplemental Reporting Period: July 1, 2020, throug</li> <li>Supplemental Reporting Period: October 1, 2020, th</li> <li>Supplemental Reporting Period: October 20, 2020, t</li> </ol>	iods listed below. If no such contributio gh NOON, April 15, 2020. gh NOON, July 15, 2020. irough NOON, October 15, 2020.		ittee is not required to file a		