



**STATEMENT OF ECONOMIC INTERESTS  
FOR LOCAL AND SCHOOL BOARD OFFICES**

**(CAN-12)**

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 LAKE

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

2014

**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 \_\_\_\_\_, 2015:

\_\_\_\_\_  
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: \_\_\_\_\_

