



PETITION OF NOMINATION AND CONSENT FOR SCHOOL BOARD OFFICE ELECTED IN 2024

State Form 47008 (R21 / 8-23)
Indiana Election Division (IC 3-8-2.5; 3-6-12)

✓
(CAN-34)

COUNTY: HOWARD

INSTRUCTIONS: This petition is used to nominate candidates for school board office. This petition must be filed with the appropriate county voter registration office not earlier than May 21, 2024 and not later than noon, June 20, 2024. Petitioners are not required to provide precinct and ward information. Except in cases of disability, the petitioner must complete the information in the petitioner's own handwriting. If assistance is provided due to disability, the assister must complete the affidavit on the reverse of this form. Each candidate must complete the Candidate's Consent on the reverse of this form and file a Statement of Economic Interests (CAN-12 form) with this petition. In a metropolitan school corporation, this petition must be signed by ten (10) registered voters residing in the same board member district as the nominee. (IC 20-23-7-8.1) In a community school corporation, this petition must be signed by ten (10) registered voters residing within the boundaries of the school corporation. (IC 20-23-4-29.1) Additional petition requirements apply in some school corporations. **Consult your attorney to be advised of your rights and responsibilities.**

TO THE HOWARD COUNTY CIRCUIT COURT CLERK (OR THE LAKE, PORTER, OR TIPPECANOE COUNTY BOARDS OF ELECTION AND REGISTRATION):
Each of the undersigned represents that: 1) the individual resides at the address after the individual's signature as of the date this petition is processed by the county voter registration officials; 2) the individual is a duly qualified registered voter in Indiana; 3) the individual desires to be able to vote for the candidates listed below; and 4) each of the undersigned respectfully requests you to place the following names of the legally qualified candidates for a school board office on the November 5, 2024 General Election Ballot. If the school district is comprised of more than one county, the petition is to be filed with the county containing the greatest percentage of population of the school corporation.

CANDIDATE NAME		COMPLETE CANDIDATE ADDRESS <small>(If different from residence, include mailing address.)</small>	OFFICE SOUGHT <small>(Include election district name or number.)</small>
1	KAREN SOSBE	1715 S. COURTLAND AVE, KOKOMO IN 46902	KOKOMO SCHOOL BOARD DIST. 3
2			
3			
4			

	SIGNATURE	PRINTED NAME		DATE OF BIRTH MM/DD/YYYY	RESIDENCE ADDRESS (No P.O. Boxes) Number Street Apartment	CITY or TOWN and ZIP CODE	Office Use Only	
		First	Last				REG (Y/N)	PCT/ WARD
1	<i>[Signature]</i>	Tammy	Tickler	9/24/65	2109 Justice Lane	Kokomo 02	Y	405
2	<i>[Signature]</i>	Cynthia	EVANS	11/18/57	2925 Whitehouse Dr	KOKOMO 02	Y	405
3	<i>[Signature]</i>	Ryan	Gilbert	05/03/80	7804 S. Indiana Ave	Kokomo 02	Y	406
4	<i>[Signature]</i>	Laura	Stiner	10/10/81	2004 Ambassador Ln.	Kokomo 02	Y	401
5	<i>[Signature]</i>	Jennifer	Goad	12/6/80	3411 Judson Kokomo	Kokomo 01	Y	CENTER A
6	<i>[Signature]</i>	Rachel	Patton	5/4/75	2028 Justice Lane	Kokomo 02	Y	401
7	<i>[Signature]</i>	Jason	Speur	7/12/77	2028 Justice Lane	Kokomo 02	Y	401
8	<i>[Signature]</i>	Alex	Sosbe	11/17/05	1730 S. Courtland	Kokomo 02	Y	403
9	<i>[Signature]</i>	Chris R.	Goad	5/24/79	3411 Judson Rd	Kokomo 01	Y	CENTER A
10	<i>[Signature]</i>	CHARLES W.	SOSBE JR	3/9/1950	1715 S. COURTLAND AVE	KOKOMO 46902	Y	403

PETITION CARRIER CERTIFICATION (Must be completed on each petition submitted for filing.)

I affirm under the penalties for perjury that I have no reason to believe that any individual whose signature appears on this page is ineligible to sign this petition or did not properly complete and sign this page.

Karen Sosbe CARRIER'S SIGNATURE KAREN SOSBE CARRIER'S PRINTED NAME 5/30/50 CARRIER'S DATE OF BIRTH (month, day, year) 18 JAN 2024 DATE SIGNED BY CARRIER (month, day, year)

1715 S. COURTLAND AVE KOKOMO IN 46902 CARRIER'S FULL ADDRESS, INCLUDING ZIP CODE (number and street, city, state, and ZIP code)

Note: Indiana state law does not require a petition carrier to be an Indiana resident or registered voter of Indiana to circulate or gather petition signatures for a candidate. All fields in this certification must be completed before filing with the county closes at noon, June 20, 2024, or the petition is rejected.

CANDIDATE NAME INFORMATION

I request that my name appear on the general election ballot in the following manner as described in IC 3-5-7. I also request that my name on my voter registration record be the same as the name on this declaration of candidacy. (IC 3-8-2-7(c)).

KAREN		SOSBE			If a candidate's name does not comply with IC 3-5-7, 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. A candidate may not use a title or degree as a designation or a designation that implies a title or degree. Nicknames are required to be printed on the ballot using parentheses. EXAMPLE: John R. (Jack) Doe
First Designation	Second Designation	Third Designation	Fourth Designation	Suffix	
This can be: • The candidate's legal given name. • The initial of the candidate's legal given name. • The candidate's legal middle name. • The initial of the candidate's legal middle name. • The candidate's nickname.	This can be: • The candidate's legal middle name. • The initial of the candidate's legal middle name. • The candidate's nickname. • The candidate's legal surname.	If not used in the first or second designation, this can be: • The candidate's nickname. • The candidate's legal surname	If not used in the third designation, this can be: • The candidate's nickname. • The candidate's legal surname	Examples: • Jr. or III CANNOT be a title or degree like MD, JD	

CANDIDATE'S CONSENT

I, the undersigned, am a candidate for the office of school board member of _____
Insert name of school corporation, including any election district designation.

I give my written consent under IC 3-8-2.5-7 to the circulation and filing of a petition under IC 3-8-2.5 to place my name on the ballot at the general election to be held November 5, 2024, designated as a candidate for this office. I meet all qualifications for this office, including residency requirements and do not have a criminal conviction that would prevent me from serving.

I have been a candidate for a state, legislative, local office, or school board office in a previous primary or general election. Yes No (Check one) (If no, skip next line.)

If yes, I have filed reports required by IC 3-9-5-10 for all previous candidacies. Yes No (Check one)

I am aware of the provisions of IC 3-9 regarding campaign finance and the reporting of contributions and expenditures. I am aware of the requirement to file a campaign finance statement of organization with the appropriate county election board after the first of the following occurs: (1) I receive more than \$500 in contributions as a school board candidate, or (2) I spend more than \$500 in expenditures as a school board candidate. I agree to comply with the provisions of IC 3-9.

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

<i>Karen Sosbe</i> Signature	<i>18 JUN 24</i> Date Signed	Subscribed and sworn to before this <u>18</u> day of <u>June</u> , 2024.	
<i>765.860.7404</i> Telephone	<i>sosbekaren@gmail.com</i> Email (optional)	<i>Debbie Stewart</i> Signature of Notary Public or Other Official Administering Oath according to IC 33-42-9-7	
Website (optional):		My Commission Expires (applies only to Notary Public): <u>December 31, 2026</u>	
NOTE: If the name of more than one candidate is included on the petition, each candidate may attach a copy of the executed consent form above when the petition of nomination is filed.		County of Residence: <u>Howard</u>	FILED

AFFIDAVIT OF ASSISTANCE PROVIDED TO PETITIONER(S) WITH DISABILITIES

I affirm under the penalties for perjury that I assisted the following petitioners, due to disability, in writing the petitioner's signature, printed name, and residence address on this petition:

Names of Petitioners Assisted by me: _____ DATE ASSISTANCE PROVIDED (month, day, year) JUN 18 2024

ASSISTER'S SIGNATURE _____ ASSISTER'S PRINTED NAME _____ ASSISTER'S ADDRESS (number and street, city, state, and ZIP code) DEBBIE STEWART Clerk Howard Cir. Court

COUNTY VOTER REGISTRATION OFFICE CERTIFICATION

County Name: <u>Howard</u>	Number of Valid Signatures: <u>10</u>	County Name: _____	Number of Valid Signatures: _____	County Name: _____	Number of Valid Signatures: _____
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I certify that, in accordance with IC 3-8-2.5-5, I have reviewed the registration records of the petitioners on this petition and certify the above number to be registered voters of the indicated County. In the case of a school corporation that covers more than one county, the county voter registration official of the containing the greatest percentage of the population of the school corporation certifies petitioners and records the number of valid signatures. Please use the space above to indicate the number of certified signatures for each county in a multi-county jurisdiction, if applicable.

Witness my/our hand and seal this <u>18th</u> day of <u>June</u> , 2024, at <u>Kokomo</u> , Indiana.	COUNTY SEAL	Signature 1 <u>Susan Kennedy</u>	<input type="checkbox"/> Clerk of the Circuit-Court or <input checked="" type="checkbox"/> Member of the Board of Registration (D) <input type="checkbox"/> Member of the Board of Registration (R)
		Signature 2, if applicable <u>Debbie Stewart - CLERK</u>	



PETITION OF NOMINATION AND CONSENT FOR SCHOOL BOARD OFFICE ELECTED IN 2024

(CAN-34)

State Form 47008 (R21 / 8-23)
Indiana Election Division (IC 3-8-2.5; 3-6-12)

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CANDIDATE NAME	COMPLETE CANDIDATE ADDRESS <small>(If different from residence, include mailing address.)</small>	OFFICE SOUGHT <small>(Include election district name or number.)</small>
1 <u>KAREN SOSBE</u>	<u>1715 S. COURTLAND AVE, KOKOMO, IN 46902</u>	<u>KOKOMO SCHOOL BOARD DISTRICT</u>
2		
3		
4		

	SIGNATURE	PRINTED NAME First Last	DATE OF BIRTH MM/DD/YYYY	RESIDENCE ADDRESS (No P.O. Boxes) Number Street Apartment	CITY or TOWN and ZIP CODE	Office Use Only	
						REG (Y/N)	PCT/ WARD
1	<u>Lewis Hall</u>	<u>Lewis Hall</u>	<u>09/02/1950</u>	<u>1527 N. Waugh</u>	<u>Kokomo, IN 46901</u>	<u>Y</u>	<u>109</u>
2	<u>Marsha Bowling</u>	<u>Marsha Bowling</u>	<u>05/14/1941</u>	<u>1101 E. Mulberry St</u>	<u>Kokomo IN 46901</u>	<u>Y</u>	<u>201</u>
3	<u>Don M. Bowling</u>	<u>DON M. BOWLING</u>	<u>08/07/1939</u>	<u>1101 E. MULBERRY ST.</u>	<u>KOKOMO IN 46901</u>	<u>Y</u>	<u>201</u>
4	<u>Michelle Gleaves</u>	<u>Michelle Gleaves</u>	<u>09/06/1960</u>	<u>3405 Judson Rd</u>	<u>Kokomo IN 46901</u>	<u>Y</u>	<u>CENTER</u>
5	<u>Lee M. Gleaves</u>	<u>Lee M Gleaves</u>	<u>09/07/1947</u>	<u>3405 Judson Rd</u>	<u>Kokomo IN 46901</u>	<u>Y</u>	<u>CENTER</u>
6	<u>Evelyn Dupire</u>	<u>Evelyn Dupire</u>	<u>12/11/1989</u>	<u>2400 Baxter Rd Apt 2</u>	<u>Kokomo IN 46902</u>	<u>Y</u>	<u>305</u>
7	<u>Christopher Dupire</u>	<u>Christopher Dupire</u>	<u>12/27/1978</u>	<u>2400 Baxter Rd. Apt. 2</u>	<u>Kokomo IN 46902</u>		<u>NRA</u>
8	<u>Amy Roe</u>	<u>Amy Roe</u>	<u>3/5/1979</u>	<u>5700 Princeton Ct</u>	<u>Kokomo IN 46902</u>	<u>Y</u>	<u>5</u>
9	<u>R. Sosbe</u>	<u>Ryleigh Sosbe</u>	<u>3-15-04</u>	<u>3623 Briarwick Dr. Apt B</u>	<u>KOKOMO, IN 46902N</u>		
10	<u>Chris Sosbe</u>	<u>Chris Sosbe</u>	<u>2-2-77</u>	<u>1730 S. Courtland, Kokomo</u>	<u>Kokomo, IN 46902</u>	<u>Y</u>	<u>403</u>

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Karen Sosbe CARRIER'S SIGNATURE KAREN SOSBE CARRIER'S PRINTED NAME 5/30/50 CARRIER'S DATE OF BIRTH (month, day, year) 18 JUN 2024 DATE SIGNED BY CARRIER (month, day, year)

1715 S. COURTLAND AVE KOKOMO IN 46902 CARRIER'S FULL ADDRESS, INCLUDING ZIP CODE (number and street, city, state, and ZIP code)

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KAREN		SOSBE			If a candidate's name does not comply with IC 3-5-7, 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. A candidate may not use a title or degree as a designation or a designation that implies a title or degree. Nicknames are required to be printed on the ballot using parentheses. EXAMPLE: John R. (Jack) Doe
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Insert name of school corporation, including any election district designation.


I give my written consent under IC 3-8-2.5-7 to the circulation and filing of a petition under IC 3-8-2.5 to place my name on the ballot at the general election to be held November 5, 2024, designated as a candidate for this office. I meet all qualifications for this office, including residency requirements and do not have a criminal conviction that would prevent me from serving.

I have been a candidate for a state, legislative, local office, or school board office in a previous primary or general election. Yes No (Check one) (If no, skip next line.)

If yes, I have filed reports required by IC 3-9-5-10 for all previous candidacies. Yes No (Check one)

I am aware of the provisions of IC 3-9 regarding campaign finance and the reporting of contributions and expenditures. I am aware of the requirement to file a campaign finance statement of organization with the appropriate county election board after the first of the following occurs: (1) I receive more than \$500 in contributions as a school board candidate, or (2) I spend more than \$500 in expenditures as a school board candidate. I agree to comply with the provisions of IC 3-9.

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

<i>Karen Sosbe</i> Signature	<i>18 Jun 24</i> Date Signed	Subscribed and sworn to before this <u>18</u> day of <u>June</u> , 2024.	
<i>765.860.7404</i> Telephone	<i>sosbekaren@gmail.com</i> Email (optional)	<i>Debbie Stewart</i> Signature of Notary Public or Other Official Administering Oath according to IC 33-42-9-7	
Website (optional):		My Commission Expires (applies only to Notary Public): <i>December 31 2026</i>	
NOTE: If the name of more than one candidate is included on the petition, each candidate may attach a copy of the executed consent form above when the petition of nomination is filed.		County of Residence: <i>Howard</i>	FILED

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I affirm under the penalties for perjury that I assisted the following petitioners, due to disability, in writing the petitioner's signature, printed name, and residence address on this petition:

Names of Petitioners Assisted by me: _____

JUN 18 2024
20
DATE ASSISTANCE PROVIDED (month, day, year)

ASSISTER'S SIGNATURE _____ ASSISTER'S PRINTED NAME _____ ASSISTER'S ADDRESS (number and street, city, state, and ZIP code) _____
Debbie Stewart
 Clerk Howard Cir. Court

COUNTY VOTER REGISTRATION OFFICE CERTIFICATION

County Name: HOWARD	Number of Valid Signatures: 8	County Name: _____	Number of Valid Signatures: _____	County Name: _____	Number of Valid Signatures: _____
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I certify that, in accordance with IC 3-8-2.5-5, I have reviewed the registration records of the petitioners on this petition and certify the above number to be registered voters of the indicated County. In the case of a school corporation that covers more than one county, the county voter registration official of the containing the greatest percentage of the population of the school corporation certifies petitioners and records the number of valid signatures. Please use the space above to indicate the number of certified signatures for each county in a multi-county jurisdiction, if applicable.

Witness my/our hand and seal this <u>18</u> day of <u>June</u> , 2024, at <u>Kokomo</u> , Indiana.	COUNTY SEAL	Signature 1 <i>Dana Wilson</i>	<input type="checkbox"/> Clerk of the Circuit-Court or <input checked="" type="checkbox"/> Member of the Board of Registration (D) <input type="checkbox"/> Member of the Board of Registration (R)
		Signature 2, if applicable <i>Debbie Stewart</i>	



PETITION OF NOMINATION AND CONSENT FOR SCHOOL BOARD OFFICE ELECTED IN 2024

(CAN-34)

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Table with 3 columns: CANDIDATE NAME, COMPLETE CANDIDATE ADDRESS (If different from residence, include mailing address.), OFFICE SOUGHT (Include election district name or number.)

Table with 7 columns: SIGNATURE, PRINTED NAME (First, Last), DATE OF BIRTH (MM/DD/YYYY), RESIDENCE ADDRESS (No P.O. Boxes) (Number, Street, Apartment), CITY or TOWN and ZIP CODE, Office Use Only (REG (Y/N), PCT/WARD)

PETITION CARRIER CERTIFICATION (Must be completed on each petition submitted for filing.)

I affirm under the penalties of perjury that I have no reason to believe that any individual whose signature appears on this page is ineligible to sign this petition or did not properly complete and sign this page.

CARRIER'S SIGNATURE: Karen Sosbe
CARRIER'S PRINTED NAME: KAREN SOSBE
CARRIER'S DATE OF BIRTH: 5/30/50
DATE SIGNED BY CARRIER: 18 Jun 2024
CARRIER'S FULL ADDRESS, INCLUDING ZIP CODE: 1715 S. COURTLAND AVE KOKOMO IN 46902

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I am aware of the provisions of IC 3-9 regarding campaign finance and the reporting of contributions and expenditures. I am aware of the requirement to file a campaign finance statement of organization with the appropriate county election board after the first of the following occurs: (1) I receive more than \$500 in contributions as a school board candidate, or (2) I spend more than \$500 in expenditures as a school board candidate. I agree to comply with the provisions of IC 3-9.

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

Signature: <u>Karen Spobe</u>	Date Signed: <u>18 Jun 24</u>	Subscribed and sworn to before this <u>18</u> day of <u>June</u> , 2024.
Telephone: <u>765.860.7404</u>	Email (optional): <u>sosbe.karen@gmail.com</u>	Signature of Notary Public or Other Official Administering Oath according to IC 33-42-9-7: <u>Debbie Stewart</u>
Website (optional): _____		My Commission Expires (applies only to Notary Public): <u>December 31 2026</u>
NOTE: If the name of more than one candidate is included on the petition, each candidate may attach a copy of the executed consent form above when the petition of nomination is filed.		County of Residence: <u>Howard</u>

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Names of Petitioners Assisted by me: _____

DEBBIE STEWART
 DATE ASSISTANCE PROVIDED: _____ (month, day, year)
 Clerk Howard Cir. Court

ASSISTER'S SIGNATURE _____ ASSISTER'S PRINTED NAME _____ ASSISTER'S ADDRESS (number and street, city, state, and ZIP code) _____

COUNTY VOTER REGISTRATION OFFICE CERTIFICATION

County Name: <u>Howard</u>	Number of Valid Signatures: <u>4</u>	County Name: _____	Number of Valid Signatures: _____	County Name: _____	Number of Valid Signatures: _____
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Witness my/our hand and seal this <u>18th</u> day of <u>June</u> , 2024, at <u>Kokomo</u> , Indiana.		COUNTY SEAL	Signature 1: <u>Susan Kennedy</u> Signature 2, if applicable: <u>Debbie Stewart - CLERK</u>	<input type="checkbox"/> Clerk of the Circuit Court or <input checked="" type="checkbox"/> Member of the Board of Registration (D) <input type="checkbox"/> Member of the Board of Registration (R)	



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

(CAN-12)

State Form 55128 (R / 8-19)
Indiana Election Division (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) certificate of nomination by a Libertarian Party convention; (3) petition of nomination as a school board candidate; (4) petition of nomination as a minor party or independent candidate; (5) declaration of intent to be a write-in candidate; or (6) 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. **NOTE:** A candidate who files a petition of nomination for an office in a county that has a separate voter registration board from the circuit court clerk's office must file this statement with the petition of nomination after the petition has been certified by the voter registration board and when it is presented for filing with the office described in IC 3-8-2-6.

STATE OF INDIANA
COUNTY OF HOWARD

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

2023

NOTE: Insert "Not Applicable" where appropriate.

I, KAREN SOSBE the undersigned, certify the following:
Name of Candidate or Person Filing Vacant Office

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

(2) The name of my spouse was IS CHARLES "CHUCK" SOSBE JR

(3) The name of my employer and the nature of its business was
NOT APPLICABLE - RETIRED

(4) The name of the employer of my spouse and the nature of its business was
NOT APPLICABLE - RETIRED

(5) If I owned a sole proprietorship, the name of the sole proprietorship and the nature of its business was
NOT APPLICABLE

(6) If I operated a professional practice, the name of the professional practice and the nature of its business was
NOT APPLICABLE

(7) If I was a member of a partnership, the name of the partnership and the nature of its business was
NOT APPLICABLE

(8) If my spouse was a member of a partnership, the name of the partnership and the nature of its business was
NOT APPLICABLE

(9) If I was a member of a limited liability company, the name of the limited liability company and the nature of its business was
NOT APPLICABLE

(10) If my spouse was a member of a limited liability company, the name of the limited liability company and the nature of its business was
NOT APPLICABLE

(11) If I was an officer or a director of a corporation (other than a church), the name of the corporation and the nature of its business was
NOT APPLICABLE

(12) If my spouse was an officer or a director of a corporation (other than a church), the name of the corporation and the nature of its business was
NOT APPLICABLE

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 18 day of June, 2024

Karen Soske
Signature

KAREN SOSKE
Printed Name

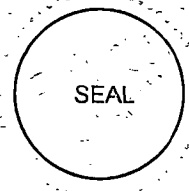
STATE OF Indiana)
COUNTY OF Howard)

Subscribed and affirmed to before me this 18 day of June, 2024

Debbie Stewart
Notary Public or Other Official Administering Oath

My Commission expires (applies only to Notary Public): December 31, 2026

County of Residence: Howard



FILED

JUN 18 2024

DEBBIE STEWART
Clerk Howard Cir. Court