

**I certify that the information in this Candidate Consent Form is true and complete,
and that I meet the specific requirements of this office.**

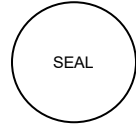
Signature _____ Date Signed (MM/DD/YYYY) ____/____/____ Telephone (Day) (____) _____ Telephone (Evening) (____) _____

OPTIONAL INFORMATION:

Candidate's email: _____ Campaign website: _____

STATE OF _____)
COUNTY OF _____)

Subscribed and sworn to before me this _____ day of _____, 2022.



Notary Public or Other Official Administering Oath according to IC 33-42-9-7

My Commission expires (*applies only to Notary Public*): _____ County of Residence: _____