



**DECLARATION OF CANDIDACY FOR NOMINATION TO THE BALLOT AND (CAN-52)  
WRITTEN CONSENT FOR A SPECIAL ELECTION TO FILL A CONGRESSIONAL VACANCY**

(8-22)  
Indiana Election Division (IC 3-10-8-5(b); IC 3-13-1-10.5, IC 3-13-1-14)

**INSTRUCTIONS:** An individual who wishes to be nominated by a major political party caucus to the ballot for a special election held to fill a congressional vacancy must file a declaration of **candidacy not later than 72 hours before the caucus** to nominate a candidate with the chair of the caucus and the Indiana Election Division. For questions on where to file this form, contact the Indiana Election Division at 800-622-4941.

TO THE  Democratic Party or the  Republican Party CAUCUS CHAIR, Kyle Hupfer

**GENERAL INFORMATION**

I, Tiernan Kane the undersigned, certify the following:  
*Name of Candidate*

(1) I am a registered voter of Precinct 130406 of the Township of Portage,  
(or of Ward, if applicable, \_\_\_\_\_ of the City or Town of \_\_\_\_\_), County of St. Joseph,  
State of Indiana.

(2) I am a candidate to be selected by the caucus for the nomination of the **(check one)**  Democratic Party **OR** the  Republican Party to the ballot for a special election held to fill an elected office vacancy in the office of United States Representative, Second Congressional District. I give my written consent for you to certify my name to the Indiana Election Division to be placed on the special election ballot to fill the congressional vacancy to be voted on at the special election if I am chosen as the above-named party's candidate by its caucus under IC 3-13-1.

(3) If I am a candidate for selection by a caucus of precinct committeemen of the political party, I am also filing a copy of this declaration with the Indiana Election Division at least seventy-two (72) hours before the time fixed for the caucus of the political party.

(4) I comply with all the requirements stated in the Constitution of the United States for this office.

**RESIDENCY INFORMATION**

(5) My complete residence address is:

1024 Leeper Avenue South Bend, IN (amend if other state) 46617  
*Complete residence address must be included* *City* *ZIP Code*

(6) My mailing address is:

*Write address if mailing address is different from residence address; write "SAME" if both addresses are identical*

SAME, IN (amend if other state) \_\_\_\_\_  
*Mailing Address* *City* *ZIP Code*

**CANDIDATE NAME INFORMATION**

I request that my name appear on the special election ballot in the following manner:

Tiernan Kane

(Include any Nickname and/or Suffix, such as Jr., Sr., II, III, IV)

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))

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. 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

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

Tiernan Kane 08/12/2022 (317) 224-9017 (317) 224-9017  
Signature Date Signed (MM/DD/YYYY) Telephone (Day) Telephone (Evening)

**OPTIONAL INFORMATION:**

Candidate's email: tiernankane@gmail.com Campaign website: \_\_\_\_\_

STATE OF Indiana )  
COUNTY OF Marion )  
Subscribed and sworn to before me this 12<sup>th</sup> day of August, 2022.

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

My Commission expires (applies only to Notary Public): 03-12-2026 County of Residence: Hendricks

