



DECLARATION OF CANDIDACY AND WRITTEN CONSENT TO FILL A BALLOT VACANCY IN 2016

State Form 47005 (R12 / 9-15)
Indiana Election Division (IC 3-13-1-10.5, IC 3-13-1-14)

(CAN-31)

INSTRUCTIONS: A declaration of candidacy to fill a **ballot vacancy** must be filed no later than 72 hours before the caucus to fill the vacancy with the chair of the caucus and the official who receives the certificate of candidate selection under IC 3-13-1-15. For questions on where to file this form, contact the Indiana Election Division at 800-622-4941. A statement of economic interests may also be required to be filed by a candidate for certain offices.

TO THE Democratic Party or the Republican Party CHAIR, N/A COUNTY, STATE OF INDIANA:

INDIANA ELECTION DIVISION
2016 JUL 18 PM 1:55

GENERAL INFORMATION

I, Eric Holcomb the undersigned, certify the following:
Name of Candidate

(1) I am a registered voter of Precinct No. 8 of the Township of Pike
(or of Ward _____ of the City or Town of Indianapolis), County of Marion, State of Indiana.

(2) I give my written consent for you to certify my name to the appropriate election official under IC 3-13-1-15 to be placed on the official general election ballot of the (check one box) Democratic Party OR the Republican Party for the office of Governor District _____ (if any) to be voted on at the general election to be held on November 8, 2016, if I am chosen as the above named party's candidate by its caucus or authorized committee under IC 3-13-1 (or if I am appointed as the party's candidate when no caucus is required to be held).

(3) If I am a candidate for selection by a caucus or committee, I am also filing a copy of this declaration with the (check one box) Indiana Election Division or the Circuit Court Clerk of the above county at least 72 hours before the time fixed for the caucus.

(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 residency requirement), and I am not ineligible to be a candidate due to a criminal conviction that would prohibit me from serving in this office.

RESIDENCY INFORMATION

(5) My complete residence address is:

8530 Silverleaf Court Indianapolis, Indiana 46278
Complete Residence Address Must Be Inserted City ZIP Code

(6) My mailing address is (if different from residence address):

_____, Indiana _____
Mailing Address (Write "SAME" if both addresses are identical or leave blank) City ZIP Code

CANDIDATE NAME INFORMATION

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

Eric Holcomb

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

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.

*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. EXAMPLE: John R. (Jack) Doe A candidate may not use a title or degree as a designation or a designation that implies a title or degree.

CANDIDATE CERTIFICATION

(7) (This paragraph does not apply to federal offices.) By initialing, I acknowledge that I have attached a copy of the applicable statement of economic interest statement, file stamped by the office required to receive the statement, or a receipt or photocopy of a receipt showing that this statement of economic interest has been filed. (initial here) EH

(8) (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) EH

(9) (This paragraph does not apply for candidates for federal office, state office, or state legislative office.) By initialing, I acknowledge that I might be required to complete training or have attained certification related to service in office. (initial here) _____

↓ Please complete reverse of form ↓

CANDIDATE CERTIFICATION (continued)

(10) (This paragraph does not apply to a candidate for federal office.)

By Initialing, I acknowledge that I am aware of the provisions of IC 3-9 regarding campaign finance and the reporting of campaign finance contributions and expenditures, and agree to comply with the provision of IC 3-9. (Initial here) W

(11) I have been a candidate for state, state legislative, or local office in a previous primary, municipal, special, or general election:

Yes No (Check one)

(If the answer to this question is no, skip paragraph 12 and proceed to paragraph 13.)

(12) I have filed all reports required by IC 3-9-5-10 for all previous candidacies: Yes No (Check one)

(13) (This paragraph only applies to a candidate for a local office if the local office receives compensation of at least \$5,000 per year, or to a local office if the local office receives compensation of less than \$5,000 but the candidate raises or spends more than \$500.) I have filed a campaign finance statement of organization for my principal candidate's committee with the appropriate county election board OR I am aware that I may be required to file the campaign finance statement of organization not later than noon, seven (7) days after the final date to file this declaration of candidacy. (Initial here) _____

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]

07/18/16

(317) 232-4545

(317) 682-7288

Signature

Date Signed (MM/DD/YY)

Telephone (Day)

Telephone (Evening)

STATE OF Indiana)
COUNTY OF marion)

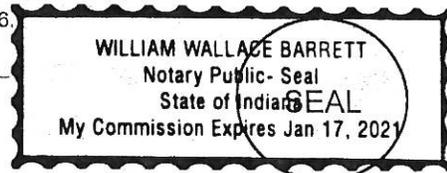
Subscribed and sworn to before me this 18 day of July, 2016.

[Signature]

Notary Public or Other Official Administering Oath according to IC 33-42-4-1

My Commission expires (applies only to Notary Public): 01/17/21

County of Residence: Johnson



CAMPAIGN FINANCE NOTICE

A candidate who fills a ballot vacancy 30 days or more before the general election must file campaign finance reports in accordance with IC 3-9-5-8.5. A candidate who fills a ballot vacancy less than 30 days before the general election must file campaign finance reports in accordance with IC 3-9-5-8.5 in addition to all other reports required by IC 3-9-5.

The candidate's committee must also file a pre-election supplemental report no later than forty-eight (48) hours after the committee receives contributions from a person that total \$1,000 or more during the period beginning **October 15, 2016, and ending November 6, 2016**, with the Indiana Election Division, appropriate county election board, or both. If no such contribution is received, the candidate's committee is not required to file a supplemental report.

A person who fails to file a report with the Indiana Election Division or a county election board is subject to a civil penalty of \$50 for each day the report is late, with the afternoon of the final date for filing the report being calculated as the first day, for a maximum penalty of not more than \$1,000, plus any investigative costs incurred and documented by the Election Division or county election board.

Special Campaign Finance Instructions for Candidates For Statewide Office Filling a Ballot Vacancy

A candidate's committee must file "quarterly" campaign finance reports with the Indiana Election Division, according to the following schedule. These filings must be made electronically, and are subject to the same civil penalties set forth in the Campaign Finance Notice above. Contact the Campaign Finance Division of the Election Division for further information.

The committee must file quarterly reports no later than noon, Indianapolis time:

- (1) April 15, 2016, covering the period from January 1, 2016, through March 31, 2016.
- (2) July 15, 2016, covering the period from April 1, 2016, through June 30, 2016.
- (3) October 17, 2016, covering the period from July 1, 2016, through September 30, 2016.
- (4) November 1, 2016, covering the period from October 1, 2016, through October 24, 2016.
- (5) January 18, 2017, covering the period from October 25, 2016, through December 31, 2016.

The candidate's committee must also file supplemental reports with the Indiana Election Division no later than forty-eight (48) hours after the committee receives contributions from a person that total \$1,000 or more during the reporting periods listed below. If no such contribution is received, the candidate's committee is not required to file a supplemental report.

- (1) Supplemental Reporting Period: April 1, 2016, through NOON April 15, 2016.
- (2) Supplemental Reporting Period: July 1, 2016, through NOON July 15, 2016.
- (3) Supplemental Reporting Period: October 1, 2016, through NOON October 15, 2016.
- (4) Supplemental Reporting Period: October 25, 2016, through NOON November 1, 2016.

From: Web Form Poster [Eholcomb@lg.in.gov]
Sent: Monday, March 14, 2016 8:37 AM
To: IG Info
Subject: [Form 40876 submlssion]

For the Calendar Year: 2015
Check if this is an amendment to your current statement.:

Name (Last): Holcomb
Name (First): Eric
Name (Middle): Joseph

Spouse's Name (Last): Amos
Name (First): Janet
Name (Middle): Renee

Office Address (Street): 200 W Washington St, rm 333
Address (City): Indianapolis
Address (Zip): 46204

Office Telephone Number: (317)2324545
Email Address (required): Eholcomb@lg.in.gov

I am filing this statement as a (select one): incumbent

Office or Agency: Lt Governor
Job Title: Lt Governor

PART 1 - GIFTS (If you have information to report below, select YES. If no information, select NO.) No

Name (Last):
Address (City):
Address (Zip):
Name (Last):

Address (City):
Address (Zip):

Name (Last):
Address (City):
Address (Zip):

PART - 2 REAL PROPERTY INTERESTS (If you have information to report below, select YES. If no information, select NO.) No

Property and its location:
Property and its location:
Property and its location:

PART - 3 Non-State Employers (If you have information to report below, select YES. If no information, select NO.) Yes

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List the name of your employer(s) and the employer(s) of your spouse and the nature of each employer's business.

Your employer:

Nature of business:

Spouse's employer: R&R Engineering Co Inc

Nature of business: Manufacturing

PART 4 - SOLE PROPRIETORSHIP OR PROFESSIONAL PRACTICE (If you have information to report below, select YES. If no information, select NO.) No

Name of Your Business:

Nature of Business:

Name of Spouse's Business:

Nature of Spouse's Business:

Do any clients for these businesses listed above have a business relationship with your agency (or in the case of a candidate, with the office sought)?

List the name of any client or customer from whom you or your spouse received more than thirty-three percent (33%) of your (or your spouse's) non-state income in a year.

PART 5 - PARTNERSHIPS (If you have information to report below, select YES. If no information, select NO.) Yes

Name of Your partnership:

Nature of partnership:

Name of Spouse's partnership: Amos Family Limited Partnership

Nature of Spouse's partnership: Shareholder

PART 6 - OFFICER OR DIRECTOR OF CORPORATION (If you have information to report below, select YES. If no information, select NO.) No

Name of Corporation:

Nature of Business:

Name of Spouse's Corporation:

Nature of Spouse's Business:

PART 7 - STOCKHOLDER OF CORPORATION (If you have information to report below, select YES. If no information, select NO.) No

Name of corporation:

your's:

spouse's:

children's:

Name of corporation:

your's:

spouse's:

children's:

Name of corporation:

your's:

spouse's:

children's:

PART 8 - MOST RECENT EMPLOYER (If you have information to report below, select YES. If no information, select NO.) Yes

Name of your most recent former employer: US Senate, Office of Sen Dan Coats

Address

Street: 10 W Market, Ste 1650

City: Indianapolis

State: IN

Zip Code:

COMMENTS

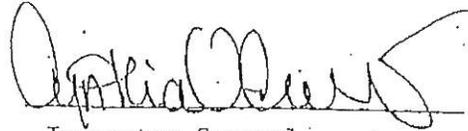
<p>Please place any comments in the fields below

FIELDS NOT DEFINED IN THE TEMPLATE FOLLOW

OFFICE OF THE INSPECTOR GENERAL
STATE OF INDIANA

Certificate of Filing

Pursuant to the provisions of IC4-2-6-8, this will certify that Eric Holcomb
has filed a financial disclosure statement for calendar year 2015
with the Office of Inspector General.


Inspector General

Date Received March 14, 2016

Office holder Candidate (*Candidates must file this certificate with the Secretary of State.*)

Governor

Lt. Governor

Secretary of State

Auditor of State

Treasurer of State

Attorney General

State Superintendent of Public Instruction

Other (*This receipt is for your records.*)

Appointing Authority of Agency

Division Director, Department of Administration

Purchasing Agent with Procurement Division, Department of Administration

Employee required by rule adopted by State Ethics Commission

Voluntary filing

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