

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) 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.

district a	Statement of Economic Interests (CA s the nominee. (IC 20-23-7-8.1) In a I petition requirements apply in some	community school corporation,	this petiti	ion must be signed	by ten (10) registered vote	ers residing within the bo	gistered voters residing in the same undaries of the school corporation. (IC 20-23	-4-29.1)
TO THE	Howard	COUNTY CIRCUIT COL	JRT CLEF	RK (OR THE LAKE	, PORTER, OR TIPPECAI	NOE COUNTY BOARDS	OF ELECTION AND REGISTRATI	 ON):	
Each of the	ne undersigned represents that: 1) the qualified registered voter in Indiana; 3	e individual resides at the addr	ess after t	the individual's sig	nature as of the date this p	etition is processed by the	ne county voter registration officials;	2) the ind	lividual
the legally	qualified candidates for a school bo	ard office on the November 5,	2024 Gen	neral Election Ballo	t. If the school district is co	mprised of more than on	e county, the petition is to be filed w	ith the co	ounty
containing	the greatest percentage of population	on of the school corporation.					En		
	CANDIDATE NAI	ME , ,			TE CANDIDATE AD om residence, include mailing		OFFICE SOUG		per.)
1 Mikki K. Jeffers			4397 S. 580 W. Russiaville Indiana 46979 Western School Board HC						
2						(AIB)	J Zuzzon.		
3						DEBBIE S	TEWART		
4							d Cir. Court		
				11.00	F 7	UKIN 1701121		Office	Use Only
	SIGNATURE	PRINTED NAME First Last		DATE OF BIRTH	RESIDENCE ADDRES	SS (No P.O. Boxes)	CITY or TOWN and ZIP CODE	REG	PCT/
	SIGNATURE	riist Last		MM/DD/YYYY	Number Street	t Apartment	GITT OF TOWN and Zin GODE	(Y/N)	WARI
1 '-	any Erb	Mancy Erk	2	10/27/1974	415 N. Union R	ussiaville	Russiaville 46979	Y.	HONE
2	ayorarb	Braydon Ert		5/9/2002	415 N. Unio	n	Russiaville 46979	LΥ	HONEY
3	sedith hensen	Voludith Town	rsud	5/16/1971	425 Mesa Dr	<u>-</u>	Russiaville 4697	† Y	HONEY
4	fla	Jasog St	out	18/18/197	443276 580	りを	Ku94, 201/64	• • •	Z HONE' ZREEK
10/1/2	la	Sean Larra		4/26/86	3140 woodfre	1d 100.	KUKomo FN 4690	RY.	HARRY B
6	Fal	Jony Erb		9/30/76	415 N. UNION	street	Russiaville IN 469		HOHEN
7	anoti Sutton	Christi Sut	ton	11-21-71	2588 5 700) w	Russiaville IN 41	<u> </u>	MONRO
8 Am	landa Harpey	Amanda Harr	HV	04/01/84	220 Mill Street		KOKOMO, IN 46902	l Y	HARPIS
9 De	eau Leicht	Man Leide	<u> </u>	7/13/55	497 D. Union ?	歼	Aussaile II) 46979	Y: .	HONEX
10 C/y	vistina Muns	Christina Mi			4297 S 580 W		Russiaville 12 4899	1 Y	CREEK
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.									
1/Jel	l Khler	MIKKII	L. J.	eHeis	<u>9-29-7</u>	<i>3</i>	Chine 19	, 20	24
CARRIER'S	S SIGNATURE ()	CARRIER'S PRINTED	NAME		CARRIER'S DATE OF	BIRTH (month, day, year)	DAZE SIGNED BY CARRI	ER (month.	day, year)

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)).								
Mikki	Kayleen						If a candidate's name does not comply with IC 3-5-7, the declaration may be challenged	
First Designation	Second Designation	Third Designati	on	Fourth Des	signation	Suffix	under Indiana Code 3-8-1-2. A candidate may use a nickname on the ballot only if the	
This can be:	This can be:	If not used in the first or seco		If not used in the third designation, this			nickname is a name by which the candidate	
The candidate's legal given name.	The candidate's legal middle name.			can be:			is commonly known and does not exceed 20	
The initial of the candidate's legal given name.	The initial of the candidate's legal	The candidate's nickname	<u>.</u>	The candidate's nickname.		CANNOT	characters. A candidate may not use a title or	
The candidate's legal middle name. middle name.		The candidate's legal surname		The candidate's legal surname		1	degree as a designation or a designation that	
The initial of the candidate's legal middle name. • The candidate's nickname.				3		1 1	implies a title or degree. Nicknames are required to be printed on the ballot using	
The candidate's nickname.	The candidate's legal surname.					1 -	parentheses. EXAMPLE; John R. (Jack) Doe	
		CANDIDATE	'S CONS	ENT				
I the undersigned am a candidate for the	I, the undersigned, am a candidate for the office of school board member of							
1, the undersigned, and a candidate for the	omee of school board member of _	Ins	sert name of s	school corporation, in	cluding any elec	tion district design	nation.	
I give my written consent under IC 3-8-2.5- candidate for this office. I meet all qualifica	7 to the circulation and filing of a p tions for this office, including reside	etition under IC 3-8-2.5 to pency requirements and do r	olace my nar not have a cr	me on the ballot at t iminal conviction th	he general elec at would preve	tion to be held N	lovember 5, 2024, designated as a ng.	
I have been a candidate for a state, legisla	tive, local office, or school board of	fice in a previous primary o	or general ele	ection. 🗌 Yes 🔳	No (Check one,) (If no, skip ne)	ct line.)	
If yes, I have filed reports required by IC 3-	9-5-10 for all previous candidacies	. 🗌 Yes 🔲 No (Check o	ne)					
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 t	true and complete, and	I that I med	et the specific re	quirements	of this office.		
When Kleff	Subscribed	d and sworn to befo	re this	day of	(SEAL)			
Signature		Date Signed	- Vu	<u>LG</u> , 202	4.001	. li		
7654342252				<u> </u>	Raulle	Mena.	r T	
Telephone 7654342252 Email (option	al) mjjjeffers@gmail.com	<u> </u>					h according to IC 33-42-9-7	
Website (optional):			My Commission Expires (applies only to Notary Public): (2/31/276 L L					
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:								
The state of the s	AFFIDAVIT OF ASS						JUN 1 9 2024	
Taffirm 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: DEBBIE STEWART Names of Petitioners Assisted by me: DATE ASSISTANCE PROVIDED (month, day, year)								
ASSISTER'S SIGNATURE ASSISTER'S PRINTED NAME ASSISTER'S ADDRESS (number and street, city, state, and ZIP code)								
County Number of Valid Ocunty Number of Valid Number of Valid Number of Valid							Number of Valid	
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. Signature 1 /								
Witness my/our hand and seal this 19th day COUNTY Signature 1 Susan Kennedy Member of the						Member of the Board of Registration (D)		
Witness my/our hand and seal this 19 day of June, 2024, at KOKOMO, Indiana. ON Signature 2, if applicable Seal Sequent - CLERK Indiana. ON Member of the Board of Registration (R)								
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STATEMENT OF ECONOMIC INTERESTS FOR LOCAL AND SCHOOL BOARD OFFICES

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:
20 <u>23</u>
NOTE: Insert "Not Applicable" where appropriate.
I, Name of Candidate or Person Filling Vacant Office the undersigned, certify the following:
(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 was Joseph E Jeffers
(3) The name of my employer and the pature of its business was Howard County Recycling ~ Gout disposal
(4) The name of the employer of my spouse and the nature of its business was
City of Kokomo - Foreman
(5) If I owned a sole proprietorship, the name of the sole proprietorship and the nature of its business was
(6) If I operated a professional practice, the name of the professional practice and the nature of its business was
(7) If I was a member of a partnership, the name of the partnership and the nature of its business was
(8) If my spouse was a member of a partnership, the name of the partnership and the nature of its business was
(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
(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
(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
(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
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 19 day of June , 2029	
Will Kleffy Signature	
Mikki K. Jeffers Printed Name	
STATE OF Indiana COUNTY OF Howard Subscribed and affirmed to before me this 19th day of June Allus Staurtor Notary Public or Other Official Administering Oath	SEAL
My Commission expires (applies only to Notary Public): 12-31-2026 County of Residence: Howard	

FILED

JUN 1 9 2024

DEBBIE STEWART Clerk Howard Cir. Court