

Instructions To File For Candidacy

Please fill out the Candidate Information Sheet, the Release of all Claims form, and the Notice of Candidacy form in its entirety. The Election Committee will not charge any additional fees incurred for the background check.

Please send these documents along with your filing fee to:

The Delaware Nation Election Committee P.O. Box 850 Anadarko, OK 73005

All candidate information packets must be postmarked by the 10th business day of the filing period. If you have any questions please call (405)247-2448 and they will forward your call to an Election Committee member.

Thank you, Delaware Nation Election Committee



Delaware Nation Election Committee P.O. Box 850 Anadarko, OK 73005 (405) 247-2448

CANDIDATE INFORMATION SHEET

LAST & FIRST NAME	
HOME ADDRESS (STREET, CITY, STATE & ZIP)	
HOME PHONE	
SSN #	
D.O.B	
PLACE OF BIRTH	
TRIBAL ENROLLMENT #	

Candidate packets must be postmarked by the last day of the filing period and mailed to:

DELAWARE NATION ELECTION COMMITTEE

P.O. Box 850 ANADARKO, OKLAHOMA 73005

Delaware Nation Election Committee Notice of Candidacy Form

Pursuant to the Delaware Nation Election Ordinance, this form shall constitute as notice that I am filing for the following elected office and that I have paid the non-refundable fee required to file for such office, as noted below:

Full Name	Date of Birth		
Mailing Address	Social Security Number		
Home Telephone Number	Mobile/Work Telephone Number		
	RECEIPT		
following requirements for candidates 1. Be a Tribal Member at least 2. Not be convicted in any cou	21 years of age on the date of the election; rt of competent jurisdiction of a felony;		
 Be a Tribal Member at least Not be convicted in any cou Not be delinquently indebted I hereby give consent to the Delaware	to run for office: 21 years of age on the date of the election; rt of competent jurisdiction of a felony;		



Delaware Nation Election Committee Post Office Box 850 Anadarko, OK 73005

CAMPAIGN CONTRIBUTION FORM

The Undersigned hereby certifies that the submission provided herein represents compliance with the Delaware Nation Election Ordinance Section 1501 B: 1 and reflects a true and accurate account of all monetary contributions over the amount of One Hundred dollars (\$100).

Candidate Name Printed	Candidate Signature	Date
Contributor Name	Date	Dollar Amount
ihad and swarn to before me	in the county of,	State of Oklahoma.
day of	, 2019.	

RELEASE OF ALL CLAIMS

The undersigned has filed a notice of candidacy with the Delaware Nation Election Committee. In consideration of the assurance by the Delaware Nation Election Committee that no determination on said "Candidacy" will be taken except after a thorough investigation of the undersigned, this investigation shall be limited to a thorough background check. The undersigned does for myself, hereby release, remise, and forever discharge the Delaware Nation Gaming Commission, The Delaware Nation Election Committee, its members, agents, and employees from any and all manner of actions, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known, or unknown, in law equity, which the undersigned ever had, now has, may have, or claim to have against any or all said entities or individuals arising out of, or by reason of the processing investigation of, or other action relating to the undersigned's Notice of Candidacy.

I, the undersigned, have read this release and ur significance: and	nderstand a	all its terms.	I execute it vol	untarily and v	vith full knowledge	e of its
know the contents thereof; that the statements c requested. I executed this statement with the acknowledge by the deemed sufficient cause to determine me	ontained h nowledgem	erein are tru nent that misi	e and contain frepresentation o	ull and true a r failure to rev	ccount of the infor real information rec	mation
I hereby expressly waive, release, and forever disc agents from any and all manner of action and can have against the licensing agency, the Delaware Candidacy.	uses of act	ion whatsoev	er; l, my admin	istrators or ex	ecutors can, shall,	or may
I hereby authorize the Delaware Nation El	ection Co	ommittee to	investigate m	ıy backgroui	nd/criminal histo	ry.
In witness whereof, I have executed this release at	t	,,	State	on the		
Day of 20)19.	·				
Applicant Signature						
Notary state of () County of ()						
Before me the undersigned, a Notary Public i	n and for	said County	and State on t	this	day of	
, 2019 personally appeared the instrument.			_ known to me	e to be the sar	ne person who ex	ecuted
My Commission Expires:		-	Notary Public	2		

Initial