



**CERTIFICATE OF ELECTION; COUNTY ASSESSOR**

**(CEB-16)**

State Form 48229 (R9 / 7-17)  
Indiana Election Division (IC 3-12-5-2)

**INSTRUCTIONS:** Upon the request of the candidate, and no earlier than NOON, seventeen (17) days after the date of the election for this office, the circuit court clerk shall deliver this certificate to the individual declared elected by the county election board under Indiana Code 3-12-4-9.

**CERTIFICATE OF ELECTION  
TO THE OFFICE OF  
COUNTY ASSESSOR**

STATE OF INDIANA

COUNTY OF \_\_\_\_\_

*WHEREAS*, Indiana Code 3-10-2-13 required that the office of County Assessor be filled by the electors at the General Election conducted on November 6, 2018; and

*WHEREAS*, the County Election Board of this County met following the close of the polls at the aforesaid election, tabulated the votes cast for the office of County Assessor, and did declare the candidate receiving the highest number of votes for that office to be elected County Assessor;

**NOW, THEREFORE, AS THE SECRETARY OF THE COUNTY ELECTION BOARD AND THE DULY ACTING CIRCUIT COURT CLERK OF THIS COUNTY, I CERTIFY THAT**

\_\_\_\_\_  
*(Name of Candidate)*

was elected **COUNTY ASSESSOR OF THE AFORESAID COUNTY** for a term of four (4) years, beginning January 1, 2019, and continuing until a successor is elected and qualified.

**WITNESS, MY HAND AND OFFICIAL SEAL, THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 2018.**

\_\_\_\_\_  
**Circuit Court Clerk**

**INSTRUCTIONS:** This oath of office may be given by any individual authorized to administer an oath under Indiana Code 33-42-9. These individuals include a notary public, a judge of a court (*within the court's jurisdiction*), a mayor, clerk or clerk-treasurer of a city or town (*within the city or town*), a circuit court clerk or county auditor (*within the county*), and a State Senator or State Representative (*anywhere within Indiana*). **Note: This oath must be filed with the circuit court clerk no later than January 31, 2019. (IC 5-4-1-1.2)**

## OATH OF OFFICE

STATE OF INDIANA

COUNTY OF \_\_\_\_\_

I, the undersigned, do solemnly swear (*or affirm*) that I will support the Constitution of the United States and the Constitution of the State of Indiana, and that I will faithfully, impartially, and diligently discharge the duties of the office of County Assessor of this County, according to law and to the best of my ability.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**SUBSCRIBED AND SWORN TO BEFORE ME, THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

*If the person administering the oath is a notary public, add the county of residence and date of expiration of commission:*

COUNTY OF RESIDENCE: \_\_\_\_\_

DATE COMMISSION EXPIRES: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_