| Voter registration Are you currently registered, or will you be registered by August 15, 2020? | YES |
|---|----------------------|
| You are not eligible to serve on the Commission if you answer "Yes" to any of the following: | |
| (1)I am now, or have been at any time since August 15, 2014, | NO |
| (a) A declared candidate for partisan election office in federal, state, or local office. | |
| (b) An elected official to partisan federal, state, or local office. | NO |
| (c)An officer or member of the governing body of a national, state, or local political party. | NO |
| (d)A paid consultant or employee of a federal, state, or local elected official or political candidate, campaign, or political action committee. | NO |
| (e)An employee of the legislature. | NO |
| (f) A lobbyist agent registered with the Michigan Bureau of Elections. | NO |
| (g)An employee of a lobbyist registered with the Michigan Bureau of Elections. | NO |
| (h)An unclassified state employee pursuant to Article XI, Section 5 of the Michigan Constitution Note: If you are an employee of courts of record, employee of the state institutions of higher education, or person in the armed forces of the state, | NO |
| you are still eligible to serve on the Commission. You should answer "No" to this prompt. | |
| (2) I am a parent, stepparent, child, stepchild, or spouse of a person to whom sections (a) through (h), above, would apply. | NO |
| (3)I am disqualified for appointed or elected office in Michigan. | NO |
| How this application will be used | |
| I understand that if randomly selected as one of 200 semi-finalists, the contents of this application (except my street address, email, and phone number) will be made available to the public. | YES, I Understand |
| I understand that while this application is a public document, my email and phone number will be kept confidential to the extent authorized by law. | YES, I Understand |

Indicate whether you agree to the following conditions if you're appointed to the Commission:

- (a) If selected to serve on the Commission, you will be not be eligible to hold a partisan elective office at the state, county, city, village, or township level in Michigan for five (5) years. Do you understand that by serving on the Commission you are ineligible to hold these elected offices for five (5) years after you are selected to the Commission?
- (b) Serving on the Commission will require a time commitment of more than one year, including periods of both part-time and full-time work (approximately 10 40+ hours per week). The Commission must conduct open meetings. Most commissioners (at least 9 of 13) must be present at each meeting. Are you able to dedicate the necessary time to fulfill your duties as commissioner in addition to your other personal and work obligations?

 Note: Like jury duty, your employer cannot fire you for serving on this commission.
- (c) Each commissioner will receive compensation. The amount is set by law at approximately \$40,000. With this financial expectation in mind, will you be able to serve on the Commission?
- (d) Being a commissioner also requires travel to at least 15 public hearings across Michigan. With travel expectations in mind, will you be able to serve on the Commission?
- (e) The Michigan Constitution states, "Each commissioner shall perform his or her duties in a manner that is impartial and reinforces public confidence in the integrity of the redistricting process." If selected, are you able to conduct yourself accordingly?
- (f) The Constitution specifies redistricting maps adopted by the Commission must receive a majority vote, and support from at least two commissioners of each political party affiliation (Democratic, Republican, and unaffiliated). If selected, do you believe you will be able to collaborate with fellow commissioners to reach consensus?

Political Affiliation

I affiliate with the Democratic Party.

NO

YES

ΥE

YE

Y

,

Applicant Information

Name

Gabrielle Angelica O'Connor

Date of Birth (MM/YYYY)

08/1991

Race

Black or African American

Sex

Female

Residential Address

Dearborn MI 48128

Hispanic, Latino, or Spanish origin?

Mailing Address (if applicable)

Contact Information

Why do you want to serve on the Michigan Independent Citizens Redistricting Commission?

I want to ensure the proper representation for all Michiganders so that their voices may be equitably heard. I live in Dearborn, which is a large and politically, racially, and economically diverse population. With that in mind, I believe that I would be able to meet with and understand others from differing backgrounds, in order to reach equity.

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Describe why or how you affiliate with either the Democratic Party, Republican Party, or why you don't affiliate with either.

I was a member of the Michigan Democratic Party until 2013. Although I still primarily identify with the party, I tend to favor the more progressive wing. I am, however, open to thoughtful discourse on all topics.

ID Number: 130181

This page must be notarized. Here's how you can do it:



Step 1: Save or Print this application to have it signed in the presence of a notary. For a list of in-person and remote/electronic notaries providing this service for free, please visit Michigan.gov/FreeNotary.

Step 2: Sign your name in the presence of a notary. The notary will also need to sign this page.

Step 3: Return your completed, notarized application to the Department of State. You can email an electronic copy of your notarized application to MDOS-NotarizedApplication@Michigan.gov. Or, you can mail your notarized application to Michigan Department of State, PO Box 30318, Lansing, MI 48909.

| Sign and sworn before County, Michigan. | me in Ways | e | |
|---|--------------------------|---|--|
| Print name exactly as it | t appears on notary app | lication: | |
| | FREDERICK | | |
| Sign exactly as it appear | | | |
| Layuh | Tudench) | | |
| Today's date | 0.5 2.011 | 2,0,2,0 | |
| Notary Public, State of N | Michigan (print county c | ommission) | JOYCELYN FREDERICK NOTARY PUBLIC, STATE OF MI COUNTY OF WAYNE |
| Commission expiration o | | Acting in the co | OCOMMISSION EXPIRES Mar 8, 2021 NG IN COUNTY OF WAYNE DUNTY Of: Jel 1 |
| Step 2: You complete th | e section below. This | / must be done in the | e presence of the notary. |
| | | | |
| · | O'Connor | | |
| Print name below: | 교육 스타마트 마다면 바다 까지 않았다. | presence of the ne | otary. |
| Print name below: Jachrie U. Sign and date below. The y signing below, I sweathy knowledge, and in pa | is must be done in the | wers provided in th | otary. his application are true to the best of tion as represented in this application |
| Print name below: Habrielle Sign and date below. Th | is must be done in the | wers provided in th | is application are true to the best of |
| Print name below: Jachre Le Sign and date below. The y signing below, I swea by knowledge, and in paraccurate. | is must be done in the | wers provided in the collitical party affilia | is application are true to the best of |