REGULAR PARTY COMMITTEE STATEMENT OF ORGANIZATION

State Form 46413 (R4/11-05)
Indiana Election Commission (IC 3-9-1-3 and IC 3-9-1-4)

(CFA-3)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

FILE NUMBER

1. IS THIS AN AMENDMENT? ☐ No ☒ Yes If Yes, please enter the file number in this box →

SECTION A. COMMITTEE INFORMATION *Fill in all applicable boxes as fully and accurately as possible*

2. Full Name of Committee *(Do not abbreviate)* ☐ Check if this is a new name
Libertarian Party of Marion Party

3. Acronym or Abbreviated Name (if any)
LPMC

4. Mailing Address *(Address where all campaign finance correspondence is received)* ☒ Check if this is a new address
133 W. Market St, #159

5. E-mail Address *(Optional)*
maguire_tj@hotmail.com

6. City: Indianapolis **State**: IN **ZIP Code**: 46204

7. FAX *(Optional)*: (317) 876-7368

8. Telephone: (317) 372-6436

9. Committee Organization Date *(MM-DD-YY)*: 01-13-09

10. Is this committee registered with the Federal Election Committee? ☐ Yes ☒ No

11. Type of Regular Party Committee *(Check one)*
☐ National ☐ State ☐ Congressional District ☒ County ☐ City ☐ Town

12. Party Affiliation *(Check one)*
☐ Democratic ☒ Libertarian ☐ Republican ☐ Other _____

13. Chairperson's Name ☒ Check if this is a new chairperson
Timothy J. Maguire

14. E-mail Address *(Optional)*
maguire_tj@hotmail.com

15. Mailing Address ☒ Check if this is a new address
133 W. Market St, #159

16. Telephone *(Day)*: (317) 372-6436

17. Telephone *(Evening)*: (317) 372-6436

18. Treasurer's Name ☒ Check if this is a new treasurer
James Majdak

19. E-mail Address *(Optional)*

20. Mailing Address ☐ Check if this is a new address
133 W. Market St, #159

21. Telephone *(Day)*: (219) 669-5663

22. Telephone *(Evening)*: (219) 669-5663

23. Custodian of Records' Name ☒ Check if this is a new custodian
John Meuser

24. E-mail Address *(Optional)*
meuserj@gmail.com

25. Mailing Address ☐ Check if this is a new address
133 W. Market St, #159

26. Telephone *(Day)*: (765) 491-1690

27. Telephone *(Evening)*: (765) 491-1690

28. Bank or Other Depositories *(List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.)*
Huntington

SECTION B. APPOINTMENT OF TREASURER (IC 3-9-1-14)

29. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee.

Person Appointed Treasurer: James Majdak

Signature of the Committee Chairperson: Timothy J. Maguire

SECTION C. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)

30. I give notice that I accept the duties and responsibilities of Treasurer of this Committee. I am not the chairperson of any other campaign finance committee.

31. Typed or Printed Name of Treasurer: James Majdak

Signature of Treasurer: [signature]

Date *(MM-DD-YY)*: 01-21-09

SECTION D. CERTIFICATION OF STATEMENT

I certify that I am the duly appointed Chairperson of the Committee and have examined this statement. To the best of my knowledge and belief it is true, correct and complete.

32. Typed or Printed Name of Chairperson: Timothy J. Maguire

Signature of Chairperson: Timothy J. Maguire

Date *(MM-DD-YY)*: 01-21-09

Warning: Any information contained in this statement may not be copied for sale or used for any commercial purpose. *(IC 3-9-4-5)* State law requires that any change in this information must be reported within 10 days of the change *(IC 3-9-1-10)* A person who knowingly files a fraudulent report commits a Class D felony. *(IC 3-14-1-13)* A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor *(IC 3-14-1-14)* and may be subject to civil penalties *(IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18)*.

FOR OFFICE USE ONLY

Elizabeth L. White
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JAN 22 2009
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