CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

(CFA-1)

State Form 4604 (R13/9-10)
Indiana Election Commission (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

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. CANDIDATE INFORMATION: *Fill in all applicable boxes as fully and accurately as possible.*

2. Last Name	First Name	Middle Name	Nickname	3. Type of Committee (Check one)
FREEMAN	DAVID	A.	DAVE	☒ Candidate's Principal Committee ☐ Exploratory Committee

4. Mailing Address	5. FAX (Optional)	6. E-mail Address (Optional)
11444 OLD OAKLAND CIR	( )	davidafreeman4@gmail.com

7. City	State	ZIP Code	8. County	9. Telephone (Day)	10. Telephone (Evening)
LAWRENCE	IN	46236	MARION	(317) 947-8036	(317) 947-8036

11. Party Affiliation ☐ Democratic ☐ Libertarian ☒ Republican ☐ Other _____

12. Office Sought (Include district number, if any. Not required for an exploratory committee.) LAWRENCE COMMON COUNCIL DIST 6

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

13. Full Name of Committee (Do not abbreviate) ☐ Check if this is a new name
COMMITTEE TO ELECT DAVID FREEMAN

14. Mailing Address ☐ Check if this is a new address	15. FAX (Optional)	16. E-mail Address (Optional)
11444 OLD OAKLAND CIR	( )	davidafreeman4@gmail.com

17. City	State	ZIP Code	18. County	19. Telephone	20. Committee Organization Date (MM-DD-YY)
LAWRENCE	IN	46236	MARION	(317) 947-8036	01-01-15

21. Chairperson's Full Name ☒ Designate Candidate as Chairperson ☐ Check if this is a new chairperson
DAVID A FREEMAN

22. Mailing Address ☐ Check if this is a new address	23. FAX (Optional)	24. E-mail Address (Optional)
11444 OLD OAKLAND CIR	( )	davidafreeman4@gmail.com

25. City	State	ZIP Code	26. County	27. Telephone (Day)	28. Telephone (Evening)
LAWRENCE	IN	46236	MARION	(317) 947-8036	(317) 947-8036

29. 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

30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.)
NONE

31. Salaries and Reimbursements (Will the committee pay the candidate a salary or reimbursement for lost wages? If Yes, attach a copy of the contract.) ☒ No ☐ Yes

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

32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee.	Person Appointed Treasurer	Signature of the Committee Chairperson
	STEPHANIE FREEMAN	[signature]

33. Treasurer's Full Name ☐ Designate candidate as treasurer ☐ Check if this is a new treasurer
STEPHANIE A. FREEMAN

34. Mailing Address ☐ Check if this is a new address	35. FAX (Optional)	36. E-mail Address (Optional)
11444 OLD OAKLAND CIR	( )	davestephie4@gmail.com

37. City	State	ZIP Code	38. County	39. Telephone (Day)	40. Telephone (Evening)
LAWRENCE	IN	46236	MARION	(317) 947-8266	(317) 947-8266

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

41. I give notice that I accept the duties and responsibilities of Treasurer of this Committee. I am not the chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-7).

Signature of Person Accepting Appointment [signature]

SECTION E. CERTIFICATION OF STATEMENT

We certify as the candidate and the duly appointed Chairperson of the Committee and that we have examined this statement. To the best of our knowledge and belief it is true, correct and complete.

42. Typed or Printed Name of Chairperson	Signature of Chairperson	Date (MM-DD-YY)
DAVID A FREEMAN	[signature]	01-19-15

43. Typed or Printed Name of Candidate	Signature of Candidate	Date (MM-DD-YY)
DAVID A FREEMAN	[signature]	01-19-15

Warning: State law requires that any change in this information 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

Myla A. Eldridge

JAN 21 2015

FILED

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