



CANDIDATE'S STATEMENT OF ORGANIZATION AND
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE
State Form 4604 (R15 / 5-19)
Indiana Election Division (IC 3-9-1-3, IC 3-9-1-4, IC 3-9-1-5)

(CFA-1)

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

FILE NUMBER									
1. IS THIS AN AMENDMENT? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please enter the file number in this box. → 32-25-070									
SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.									
2. Last Name DuBois		First Name BRAD		Middle Name J		Nickname		3. Type of Committee (Check one) <input type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee	
4. Mailing Address (number and street, city, state, and ZIP code) 451 SERRA DR. APT 204				5. FAX (Optional)		6. E-mail Address (Optional)			
7. City PLAINFIELD		State IN	ZIP Code 46168	8. County HENDRICKS		9. Telephone (Day) (317) 531-0190		10. Telephone (Evening) () SAME	
11. Party Affiliation <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input type="checkbox"/> Republican <input type="checkbox"/> Other				12. Office Sought (Include district number, if any. Not required for an exploratory committee) SCHOOL BOARD					
SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.									
13. Full Name of Committee (Do not abbreviate.) <input type="checkbox"/> Check if this is a new name. COMMITTEE TO ELECT BRAD DuBOIS FOR SCHOOL BOARD									
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. P.O. Box 222				15. FAX (Optional)		16. E-mail Address (Optional)			
17. City PLAINFIELD		State IN	ZIP Code 46168	18. County HENDRICKS		19. Telephone (317) 531-0190		20. Committee Organization Date (mm/dd/yy)	
21. Chairperson's Full Name <input type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. BRAD DuBOIS									
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. P.O. Box 222				23. FAX (Optional)		24. E-mail Address (Optional)			
25. City PLAINFIELD		State IN	ZIP Code 46168	26. County HENDRICKS		27. Telephone (Day) (317) 531-0190		28. Telephone (Evening) ()	
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.) WILL UPDATE IF NEEDED									
30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.)					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.) <input type="checkbox"/> Yes <input type="checkbox"/> No				
SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)									
32. I, as Chairperson of the foregoing Person Appointed Treasurer committee, appoint the following person as Treasurer of the Committee. BRAD DuBOIS				Signature of the Committee Chairperson 					
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. BRAD DuBOIS									
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. P.O. Box 222				35. FAX (Optional)		36. E-mail Address (Optional)			
37. City PLAINFIELD		State IN	ZIP Code 46168	38. County HENDRICKS		39. Telephone (Day) ()		40. Telephone (Evening) ()	
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 			
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 BRAD DuBOIS				Signature of Chairperson 			Date (mm/dd/yy) 7/9/2025		
43. Typed or Printed Name of Candidate BRAD DuBOIS				Signature of Candidate 			Date (mm/dd/yy) 7/9/2025		
Warning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Level 6 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).									

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Mayoria, Pike

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