



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

(CFA-1)

State Form 4604 (R15 / 5-19)

Indiana Election Division (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? ☐ Yes ☒ No 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 Wathen	First Name Eric	Middle Name L	Nickname	3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee	
4. Mailing Address (number and street, city, state, and ZIP code) 1194 W County Road 950 North			5. FAX (Optional) ()	6. E-mail Address (Optional) ewathen@hotmail.com	
7. City Lizton	State IN	ZIP Code 46149	8. County Hendricks	9. Telephone (Day) (317) 997-5859	10. Telephone (Evening) (317) 997-5859
11. Party Affiliation <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Other			12. Office Sought (Include district number, if any. Not required for an exploratory committee.) Hendricks County Council		

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

13. Full Name of Committee (Do not abbreviate.) <input checked="" type="checkbox"/> Check if this is a new name. Eric Wathen for Hendricks County					
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 1194 W County Road 950 North			15. FAX (Optional) ()	16. E-mail Address (Optional) ewathen@hotmail.com	
17. City Lizton	State IN	ZIP Code 46149	18. County Hedndricks	19. Telephone (317) 997-5859	20. Committee Organization Date (mm/dd/yy) 06/26/25
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Eric Wathen					
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 1194 W County Road 950 North			23. FAX (Optional) ()	24. E-mail Address (Optional) ewathen@hotmail.com	
25. City Lizton	State IN	ZIP Code 46149	26. County Hendricks	27. Telephone (Day) (317) 997-5859	28. Telephone (Evening) (317) 997-5859
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.) None					
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 checked="" type="checkbox"/> No		

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 Eric Wathen	Signature of the Committee Chairperson 			
33. Treasurer's Full Name <input checked="" type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. Eric Wathen					
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 1194 W County Road 950 North		35. FAX (Optional) ()	36. E-mail Address (Optional) ewathen@hotmail.com		
37. City Lizton	State IN	ZIP Code 46149	38. County Hendricks	39. Telephone (Day) (317) 997-5859	40. Telephone (Evening) (317) 997-5859

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
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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 Eric Wathen	Signature of Chairperson 	Date (mm/dd/yy) 06/26/25
43. Typed or Printed Name of Candidate Eric Wathen	Signature of Candidate 	Date (mm/dd/yy) 06/26/25

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).

FOR OFFICE USE ONLY

2025 JUN 27 AM 8:37
Mangie Pike
FILED
CLERK OF SUPERIOR COURT