



**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 checked="" type="checkbox"/> No If Yes, please enter the file number in this box. →						32-25-001
SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.						
2. Last Name		First Name		Middle Name		Nickname
Gary		Anthony		Drew		
4. Mailing Address (number and street, city, state, and ZIP code)				5. FAX (Optional)		6. E-mail Address (Optional)
5794 Courtyard Crescent						
7. City		State	ZIP Code	8. County		9. Telephone (Day)
Indianapolis		IN	46234	Hendricks		(317) 756-1159
10. Telephone (Evening)		11. Party Affiliation				
(317) 756-1159		<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.)						3. Type of Committee (Check one)
Hendricks County Council - District Two						<input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee
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 Anthony Gary						
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address.				15. FAX (Optional)		16. E-mail Address (Optional)
5794 Courtyard Crescent						
17. City		State	ZIP Code	18. County		19. Telephone
Indianapolis		IN	46234	Hendricks		(317) 756 1159
20. Committee Organization Date (mm/dd/yy)		21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson.				
04/15/2025		Anthony Drew Gary				
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address.				23. FAX (Optional)		24. E-mail Address (Optional)
5794 Courtyard Crescent						
25. City		State	ZIP Code	26. County		27. Telephone (Day)
Indianapolis		IN	46234	Hendricks		(317) 756-1159
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.)				
(317) 756-1159		Pending				
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		
				Ashley N. Gary		
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer.				Signature of the Committee Chairperson		
Ashley N. Gary						
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address.				35. FAX (Optional)		36. E-mail Address (Optional)
5794 Courtyard Crescent						
37. City		State	ZIP Code	38. County		39. Telephone (Day)
Indianapolis		IN	46234	Hendricks		(574) 304-2425
40. Telephone (Evening)		SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)				
(574) 304-2425		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						FOR OFFICE USE ONLY
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)		
ANTHONY DREW GARY				04/15/2025		
43. Typed or Printed Name of Candidate		Signature of Candidate		Date (mm/dd/yy)		
ANTHONY DREW GARY				04/15/2025		
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).						

FOR OFFICE USE ONLY

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CLERK OF THE INDIANA COURT