

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)

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

							1	FILE NUMBER
1. IS THIS AN AMENDMENT?	Ye	s INO If Yes	, please e	enter the file r	numbe	er in this box	r. → 3	32-25-1018
SECTIONA. CANDIDAT	EINFO	RMATION: Fill	in all an	plicable box	es a	s fully and	accura	tely as possible
2. Last Name	F	irst Name		die Name		Nickname		3. Type of Committee (Check one)
BRIDGET		DANIEL	E	EARL		DAN		Candidate's Principal Committee
4. Mailing Address (number and street, city, state, and ZIP code) 5. FAX (Optional) 6. E-mail Address (Optional)								
411 5. CARR BI	0.,2	allow the con	1-14	105			dan	iele.bridgeteqmail.c
7. City	State	ZIP Code	8. County			ephone (Day)	17	10. Telephone (Evening)
PLAINFIELD	IN	46168	THEN	UDRICES	(31'	1868.0	013	317,868-00/3
11. Party Affiliation	ublican F	Other		PIA IN/FIE	t (Inclu	de district numbe Town///	er, if any. I	Not required for an exploratory committee.) $I \perp WARD 5$
SECTION B. COMMITTE			in all an	plicable bo	YAS a	fully and	accura	tely as possible
13. Full Name of Committee (Do not a	bbreviate.)	Check if this is	a new name.	piledbie bo	ico de	s runy and	accura	tery as possible.
DAN BRIDGET	EL	ECTION	CON	MITIL	EE			
14. Mailing Address (number and street, city, state, and ZIP code) Check if this is a new address. 15. FAX (Optional) 16. E-mail Address (Optional)								
411 S. CARR	R	DAD		(-)			2
17 City	State	ZIP Code	18. County		19. Te	lephone		20. Committee Organization Date
PLAINFIELD	IN	46168	HENI	ricks	31	7868-0	013	(mm/dd/yy) 01-21-2015
21. Chairperson's Full Name De De	signate Ca	andidate as Chairperso	n. 🗌 Che	eck if this is a new	chairpe	rson.		
DANIEL EARL	BRI	DGEI						
22. Mailing Address (number and street, cit	Illing Address (number and street, city, state, and ZIP code) □ Check if this is a new address. 23. FAX (Optional)				ional)	24. E-mail Address (Optional)		
25,,City	State	ZIP Code	26. County	I(27. Te	lephone (Day)		28. Telephone (Evening)
PLAINFLELD	IN	46168	HEM	DRICKS	131	2868-00	213	817,868-0013
29. Bank or Other Depositories (List al	l banks or	other depositories in w	hich the con	nmittee deposits fu	inds, ho	lds accounts, rei	nts safety o	deposit boxes or maintains funds.)
INDIANA MEMBERS CREDIT UNION								
30. Exploratory Committee (Give brief sta	ntement expl	aining purpose of an explor	atory committee	e only.) 31. Salari	es and I	Reimbursemen	ts (Will the	committee pay the candidate a salary or a copy of the contract.) Yes
					ment for	Not Wages? It i	res, anach	
SECTION C. APPOINTME					1.10	e l'anti-		A CARLES AND A CARL
32. I, as Chairperson of the foregoing Person Appointed Treasurer Signature of the Committee Chairperson committee, appoint the following person as								
Treasurer of the Committee.		PAIRI	CIA	M, BRI	VOE	IN/	1/1/	h Pohl
A] Check if th	nis is a new treasu	rer.			(
THIRICHT IN, DRI 34. Mailing Address (number and street, cit	DGE		this is a new	address ISE EA	V (Ont	<u></u>	26 E mal	Address (Onlines)
	POAT		una la a nev	Waddless. 30. FA	a (Ope			Address (Optional)
37. City	State	ZIP Code	38. County	,) 39. Tel	ephone (Day)	12414	1eb 49 @ 9 mgri (, Can) 40. Telephone (Evening)
PLAINFIELD .	IN	46168		RICKS		3401-5	43.5	(317,407-5435
SECTION D. ACCEPTAN				and the second se	() (and windows	100	
41. I give notice that I accept					his Si	nature of Pe	rson Acc	cepting Appointment
Committee. I am not the chair	person o	of a campaign fina				Patrie	141 112	A. Buident
permitted for a candidate commit SECTION E. CERTIFICAT	A DECK OF THE OWNER.	NAME AND ADDRESS OF TAXABLE PARTY.			278 B.D.D		A state	FOR OFFICE USE ONLY
We certify as the candidate an	and the second second	the product of the second s	airperson	of the Comm	ittee a	nd that we	have	< N #=
examined this statement. To the b	est of o	ur knowledge and	bellef it is	true, correct ar	nd com	plete.		ILED HENDER
2. Typed or Printed Name of Cha		- 1/1.	hairperso	n All		Date (mm/dd/yy)		
VANIEL EARL BRI	DGE	1 Alter	12	Obt		06-24-2	2	ED Entranscours 5 PM 1:
3. Typed or Printed Name of Can		Signature of (andidate	20.21		Date (mm/dd/yy)	ne l	l: h
DANIEL EARL BRI	DGE	T Klaus	12	Ast		06-74-0	12	σı –
Warning: State law requires that any o	change in	this information be rep						
person who knowingly files a fraudulent accurate report as required by the India								1
ubject to civil penalties (IC 3-9-4-16, IC :								

(CFA-1)