



**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. → **32-26-009**

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

2. Last Name **THOMPSON** First Name **JAY** Middle Name _____ Nickname _____
3. Type of Committee (Check one)
☒ Candidate's Principal Committee
☐ Exploratory Committee

4. Mailing Address (number and street, city, state, and ZIP code) **7722 OVAL CREEK TRACE PITTSBORO IN 46167** 5. FAX (Optional) _____ 6. E-mail Address (Optional) _____

7. City **PITTSBORO** State **IN** ZIP Code **46167** 8. County **HENDRICKS** 9. Telephone (Day) **317,540.0700** 10. Telephone (Evening) **317,540.0700**

11. Party Affiliation
☐ Democratic ☐ Libertarian ☒ Republican ☐ Other _____ 12. Office Sought (Include district number, if any. Not required for an exploratory committee.)
PITTSBORO TOWN COUNCIL

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.
THOMPSON FOR TOWN COUNCIL

14. Mailing Address (number and street, city, state, and ZIP code) ☐ Check if this is a new address. **7722 OVAL CREEK TRACE** 15. FAX (Optional) _____ 16. E-mail Address (Optional) _____

17. City **PITTSBORO** State **IN** ZIP Code **46167** 18. County **HENDRICKS** 19. Telephone **317,540.0700** 20. Committee Organization Date (mm/dd/yy) **01.20.26**

21. Chairperson's Full Name ☒ Designate Candidate as Chairperson. ☐ Check if this is a new chairperson.
JAY THOMPSON

22. Mailing Address (number and street, city, state, and ZIP code) ☐ Check if this is a new address. _____ 23. FAX (Optional) _____ 24. E-mail Address (Optional) _____

25. City _____ State _____ ZIP Code _____ 26. County _____ 27. Telephone (Day) _____ 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.)
STATE BANK

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.) ☐ Yes ☒ 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. _____ Signature of the Committee Chairperson **Jay Thompson**

33. Treasurer's Full Name ☒ Designate candidate as treasurer. ☐ Check if this is a new treasurer. _____

34. Mailing Address (number and street, city, state, and ZIP code) ☐ Check if this is a new address. _____ 35. FAX (Optional) _____ 36. E-mail Address (Optional) _____

37. City _____ State _____ ZIP Code _____ 38. County _____ 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 _____ Signature of Chairperson _____ Date (mm/dd/yy) _____

43. Typed or Printed Name of Candidate **JAY THOMPSON** Signature of Candidate _____ Date (mm/dd/yy) **01.20.26**

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 COURTS**