



**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. → 32-26-033**

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

2. Last Name Wielenberg	First Name Margaret	Middle Name Dewey	Nickname		3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee
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4. Mailing Address (number and street, city, state, and ZIP code) 5449 Caplen Bay Court	5. FAX (Optional) ( )		6. E-mail Address (Optional)		
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7. City Plainfield	State IN	ZIP Code 46168	8. County Hendricks	9. Telephone (Day) (317) 400-2463	10. Telephone (Evening) ( )
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11. Party Affiliation <input checked="" 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.) Plainfield School Board of Trustees
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**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.  
Elect Margaret Wielenberg

14. Mailing Address (number and street, city, state, and ZIP code) 5449 Caplen Bay Court	15. FAX (Optional) ( )		16. E-mail Address (Optional) margaretwielenberg@gmail.com		
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17. City Plainfield	State IN	ZIP Code 46168	18. County Hendricks	19. Telephone (317) 400-2463	20. Committee Organization Date (mm/dd/yy) 05/24/2024
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21. Chairperson's Full Name Margaret Wielenberg	<input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson.	
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22. Mailing Address (number and street, city, state, and ZIP code) 5449 Caplen Bay Court	23. FAX (Optional) ( )		24. E-mail Address (Optional)		
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25. City Plainfield	State IN	ZIP Code 46168	26. County Hendricks	27. Telephone (Day) (317) 400-2463	28. Telephone (Evening) ( )
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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.) Citizens Bank Plainfield
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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
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**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 Margaret Wielenberg
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Signature of the Committee Chairperson

*Margaret Wielenberg*

33. Treasurer's Full Name Margaret Wielenberg	<input checked="" type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer.	
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34. Mailing Address (number and street, city, state, and ZIP code) 5449 Caplen Bay Court	35. FAX (Optional) ( )		36. E-mail Address (Optional)		
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37. City Plainfield	State IN	ZIP Code 46168	38. County Hendricks	39. Telephone (Day) (317) 400-2463	40. Telephone (Evening) ( )
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**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 Margaret Wielenberg	Signature of Chairperson <i>Margaret Wielenberg</i>	Date (mm/dd/yy) 02/11/2026
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43. Typed or Printed Name of Candidate Margaret Wielenberg	Signature of Candidate <i>Margaret Wielenberg</i>	Date (mm/dd/yy) 02/11/2026
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**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).

2026 FEB 11 PM 1:46  
FOR OFFICE USE ONLY  
*Margaret Wielenberg*  
FILED  
CHIEF OF THE HONORABLE COURTS