(CFA-1)

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.

Adair Joshua David Candidates Principal 4. Mailing Address (number and steet, city, state: and 2/P code) 5. FAX (Optional) 6. E-mail Address (Optional) 4. Mailing Address (number and steet, city, state: and 2/P code) 8. County 9. Telephone (Day) 11. Party Affinition [12. Office Sought (inducte state number, if any, Not required for an exploratory Judge - Hendricks Superior Court 1 20. Committee (Do not abdrevate) [20. Office Sought (inducte state) and accurately as possible. 13. Full Name of Committee (Do not abdrevate) [20. Office Sought (inducte state) and address (Optional) 67 E Garner Road Suite 2000 [21 Code] 18. County 19. Telephone (Day) 67 L Garner Road Suite 2000 [21 Code] 18. County 19. Telephone [20. Committee (Drandaldrevate) 72. City State 2/P Code] 18. County 19. Telephone (Day) [21. Code (It has is a new address. [23. FAX (Optional)] [24. E-mail Address (Optional)] 72. City State 2/P Code] 18. County [317, 409-5065 [20. Committee (Drandaldre as Chargerson. 82. Mailing Address (number and steet, city, state, and 2/P code) Check if this is a new address. [23. FAX (Optional)] [24. E-mail Address (Optional)]										FILE	NUMBE	R
2. Last Name First Name Middle Name Nickname State Propert Committee (Dr. State SP morphile									-	//		32
A Last Mains Adair Joshua David Adair Joshua David David Candidates Promable Equivalence Committee Commit						e boxe			ccura			
Adair Joshua David Exploratory Committe 4. Mailing Address (number and steet, dy, state: and 2/P code) 5. FAX (Optional) 6. E-mail Address (Optional) 7. Gity Nate 2/P code 8. County 9. Telephone (Day) 10. Telephone (Evening) 9. Total phone Nate 2/P code 8. County 9. Telephone (Day) 10. Telephone (Evening) 11. Party Attiliation Democradic 12. Office Sought (include distant number, Jany Natr requard for an exploratory Dumocradic Lubentrain (Evening) 13. Fail Mame of Committee (David Addresia) 10. Telephone (Day) 10. Telephone (Evening) 13. Fail Mame of Committee (David Addresia) 10. Check (I this is a new number. 10. Committee (David Addresia) 10. E-mail Address (Optional) 67 E Garrier Road Suite 200 13. Call mame of Second Suite 200 14. Check (I this is a new address. 15. FAX (Optional) 16. E-mail Address (Optional) 67 E Garrier Road Suite 200 14. Call address (mather and steet dy, state and 2/P code) 16. Acauty 19. Telephone 20. Committee Grant Address (Optional) 12. Obtainerson's Full Name Designate Candidate as Chairperson. 11. Control 13. 7, 409-5065 20. Committee Grant Address (Optional) 21. Chairperson's Full Name Designate Candidate as Chairpers	2. Last Name	First N	first Name		Middle Name		Nickname			3. Type of Committee (Check one)		
A Mailing Address (punctor and steet, dy, state, and 2P code) AddS1 Myrtle Drive T. Gity Prittsboro IIN Address (Dptional) S. FAX (Optional) Democritics S. FAX (Optional) S. FAX (Optional) S. FAX (Optional) Democritics S. FAX (Optional) S. FAX (Optional) S. FAX (Optional) S. FAX (Optional) Democritics S. FAX (Optional) S. FAX (Optional) S. FAX (Optional) S. FAX (Optional) Democritics S. FAX (Optional) S. FAX (Optional) Democritics S. FAX (Optional) S. FAX (Optional) S. FAX (Optional) Democritics S. FAX (Optional) S. FAX (Optional) S. FAX (Optional) Democritics S. FAX (Optional) Democritics S. FAX (Optional) S. FAX (Opt	Adair	Josh	iua	1	David					Exploratory Committee		
4851 Myrtle Drive Image: State of the	SUMMER STATE	et. city. state. and ZIP co	de)		5. F	AX (Optio	onal)	6	. E-mail			~
Temperature State ZIP Code 8. County 9. Telephone (Dw) 10. Telephone (Evening) Pittsboro II. Party Affiliation Office Sought (include distinct number (I any Not required for an exploratory) Judge - Hendricks Superior Court 1 Democratic Lubortanian Republican Other Judge - Hendricks Superior Court 1 SECTION B. COMMITTEE INFORMATION: Fill In all applicable boxes as fully and accurately as possible. Intervention Intervention Intervention Committee to Elect Adair for Judge Intervention Intervention Intervention Intervention Intervention Committee to Elect Adair for Judge Intervention Intervention Intervention Intervention Intervention City State ZIP Code Intervention Intervention Intervention Intervention Intervention Zis Charperson's Full Name Designate Candidate as Charperson. Intervention Intervention Intervention Intervention Zis Charperson's Full Name Designate Candidate as Charperson. Intervention Intervention Intervention Intervention Zis List at Bank axblor (Loss departs) Intervention<					1							
Pittsboro IN 46167 Hendricks (317) 523-3308 () 11. Party Affiliation [2.0ffice Sought (include district number, if any. Not required for an exploratory Judge - Hendricks Superior Court 1 Section 8. comMittee INFORMATION: Fill in all applicable boxes as fully and accurately as possible. 13. Full Name of comattine (include district number, if any. Not required for an exploratory Judge - Hendricks Superior Court 1 Section 8. comMittee INFORMATION: Fill in all applicable boxes as fully and accurately as possible. 14. Mailing Address (number and state and 2P code) Committee to Elect Adair for Judge To Committee Conductive and address (Colliconal) 67 E Garner Road Suite 200 10. Charperson's Full Name Designate candidate as Charperson. 2.1 Charperson's Full Name Designate candidate as Charperson. 2.1 Charperson's Full Name Designate and street city state and 2P code) Code: 10. Check if this is a new address. 2.1 Charperson fail Name Designate candidate as Charperson. 2.1 Charperson fail Name <td< td=""><td></td><td>State</td><td colspan="2">ZIP Code 8. Cour</td><td colspan="2">unty</td><td colspan="2">9. Telephone (Day)</td><td></td><td colspan="3">10. Telephone (Evening)</td></td<>		State	ZIP Code 8. Cour		unty		9. Telephone (Day)			10. Telephone (Evening)		
11. Party Affiliation 12. Office Sought (Include extant number, if any, Not required for an exploratory Judge - Hendricks Superior Court 1 25. COMMITTEEINFORMATION: Fill in all applicable boxes as fully and accurately as possible. 13. Full Name of Committee (Do not abbrevate.) 12. Office Sought (Include extant number, if any, Not required for an exploratory Judge - Hendricks Superior Court 1 25. COMMITTEEINFORMATION: Fill in all applicable boxes as fully and accurately as possible. Committee to Elect Adair for Judge 14. Mailing Address (number and steet, city, state and 2P code) 12. Office Sought (Include extension) 76. Te Garner Road Suite 200 77. City State 2IP Code Brian E., Bewley 10. Exemption 23. Address (number and steet, city state and 2IP code) Check if this is a new address. 24. E-mail Address (Optional) 24. E-mail Address (Optional) 25. City IN 46167 26. County 21. Telephone (Dav) 28. Telephone (Evening) 25. Telephone (Clav) IN 46167 26. County 21. Telephone (Dav) 28. Telephone (Evening) 21. State Bank awd for Check 8 dawk 36. Exploratory Committee (Gov bid statemed explaining parget of an exploratory committee (applaining address (number and steet city state and 2P code) <td< td=""><td></td><td>IN</td><td colspan="2">46167 Hendri</td><td colspan="2">ricks (</td><td colspan="2">317, 523-3308</td><td colspan="2">1</td><td></td></td<>		IN	46167 Hendri		ricks (317, 523-3308		1			
□ barboratic □ barboratic Judge - Hendricks Superior Court 1 SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible. 13. Full Name of Committee (Do not abdrevate) If Check if this is a new name. Committee to Elect Adair for Judge 14. Mailing Address number and steet dry state and 2P code) If Check if this is a new address. 15. FAX (Optional) 16. E-mail Address (Optional) 67 E Garner Road Sulte 200 19. Telephone 17. city IN 46112 Brownsburg IN 46112 Hendricks (317, 409-5065 21. chairperson's Full Name Designate Candidate as Chairperson. 22. dialing Address (number and street, city state and 2P code) Check if this is a new address. 23. FAX (Optional) 24. E-mail Address (Optional) 24. E-mail Address (Optional) 24. E-mail Address (Optional) 25. City IN 24 Decoh 26. County (317, 409-5065 28. Bank or Other Depositories (Last and so or other depositories m which the committee deposits funds, holds accounts, rents safety deposit backs or maintains fur 29. Bank or Other Depositories (Last and street city state and 2P code) 31. Staries and Reimbursements (Will the committee pay the candidate											exploratory	committee.)
13. Full Name of Committee (Do not abbreviate.) Image: Committee (Committee Committee Comm	🗆 Democratic 🔲 Libertarian 🗹	Republican 🗌 Othe	er		Judge	- Hen	dricks S	uperior C	ourt 1			
Committee to Elect Adair for Judge 14. Mailing Address (marker and street, if y state, and ZIP code) Check if this is a new address. 15. FAX (Optional) 16. E-mail Address (Optional) 17. City State ZIP Code 18. County 19. Telephone 20. Committee Organization Brownsburg IN 46112 Hendricks 21. Chairperson's Full Name 20. Committee Organization Brian E. Bewley Estate ZIP Code 10. Check if this is a new address. 23. FAX (Optional) 24. E-mail Address (Optional) 25. City IN 46167 Check if this is a new address. 23. FAX (Optional) 24. E-mail Address (Optional) 25. City IN 46167 Hendricks 23. FAX (Optional) 24. E-mail Address (Optional) 26. City IN 46167 Hendricks 23. FAX (Optional) 24. E-mail Address (Optional) 26. City IN 46167 Hendricks 23. Tosephone (Day) 28. Telephone (Day) 21. Last Bank oxol or Check @oxk IN 46167 Hendricks 31. Salaries and Reimbursements (Will the committee pay the candidate acom the option optio	SECTION B. COMMIT	TEE INFORM	ATION: F	ill in all a	applicabl	e boxe	es as fu	Illy and a	ccura	tely as poss	sible.	
14. Mailing Address (number and street city, state, and ZIP code) If Check if this is a new address. 15. FAX (Optional) 16. E-mail Address (Optional) 67 E Garmer Road Suite 200 It is a new address. 19. Felephone 20. Committee Organization 17. City State ZIP Code 18. County 19. Telephone 20. Committee Organization Brownsburg It is a new address. 21. Chaipperson's Full Name Designate Candidate as Chairperson. It chaipperson 21. Chaipperson's Full Name Designate Candidate as Chairperson. It is a new address. 23. FAX (Optional) 24. E-mail Address (Optional) 27. 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) 24. E-mail Address (Optional) 24. E-mail Address (Optional) 24. E-mail Address (Optional) 25. City 97. Back of Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, rents safely deposit boxes or maintains fur issue and option the following person as methane unplane puppers of an exploratory committee only. 31. Sataries and Reimbursement for kost wages? If Yes, attach a copy of the contract.) Yes 32. Exploratory Committee (Give brid statement explaiming purpose of an exploratory committee only. 31. Sataries and Reimbursements (Will the committee pay the candidate as treasurer. <t< td=""><td></td><td></td><td>Check if this</td><td>is a new nan</td><td>ne.</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>			Check if this	is a new nan	ne.							
67 E Garner Road Suite 200 (j) 17. City State ZIP Code 18. County 19. Telephone 20. Committee Organization Brownsburg IN 46112 Hendricks (317) 409-5065 20. Committee Organization 21. Chairperson's Full Name Designate Candidate as Chairperson. Check if this is a new chairperson. 24. E-mail Address (Optional) 4974 Devonshire Drive (j) 24. E-mail Address (Optional) 24. E-mail Address (Optional) 25. City IN 46167 Hendricks 21. Telephone (Day) 28. Telephone (Evening) 9 Hitsboro IN 46167 Hendricks 21. Telephone (Day) 28. Telephone (Evening) 9 Hitsboro IN 46167 Hendricks 31. Salaries and Reimbursements (Will the committee pay the candidate action action of the committee (Gave bed statement explaming purpose of an explanate committee only) 31. Salaries and Reimbursements (Will the committee pay the candidate action action of the foregoing Person Appointed Treasurer Signature of the Committee Chairperson 32. 1, as Chairperson of the foregoing Person Appointed Treasurer of the Committee. Signature of the Committee Chairperson Signature of the Committee Chairperson 33. Treasurer's Full Name Designate candidate as treasurer.												
17. City State ZIP Code 18. County 19. Telephone 20. Committee Organization 17. City IN 46112 Hendricks (317, 409-5065) 20. Committee Organization 21. Chairperson's Full Name Designate Candidate as Chairperson. Immiddity) 08/15/20 22. Mailing Address (number and steel, city, state and ZIP code) Check if this is a new address. 21. FAX (Optional) 24. E-mail Address (Optional) 4974 Devonshire Drive IN 46167 Hendricks (317, 409-5065) 28. Telephone (Day) 23. Bank or Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains fur 30. Exploratory Committee (Gwe bief statement explaining purpose of an exploratory committee orly) 31. Salaries and Reimbursements for lost wages? If Yes, attach a copy of the contract) Immidee orgony of the contract) Immidee orgony of the contract) 31. Treasurer of the Committee. Immidee and steel city, state and ZIP code Steel Plane Steel Plane Signature of the Committee Chairperson 33. Treasurer S Full Name Designate candidate as treasurer. Immidee Check if this is a new address. 35. FAX (Optional) Steemal Address (Optional) 31. Treasurer S Full Name Designate candidate as treasure			ode) 🗹 Chee	ck if this is a	new address.	15. FA	X (Optional	1	6. E-ma	il Address (Optio	nal)	
Brownsburg IN 46112 Hendricks (317) 409-5065 (mm/ddyy) 08/15/20 21. Chairperson's Full Name Designate Candidate as Chairperson. Image: Check if this is a new address. 23. FAX (Optional) 24. E-mail Address (Optional) 22. Mailing Address (aumber and street, city state and ZIP code) Check if this is a new address. 23. FAX (Optional) 24. E-mail Address (Optional) 23. Grave of the Depositories (List atternet city state and ZIP code) IN 46167 Hendricks (317) 409-5065 (67 E Garner Road Suit	te 200				()					
Brownsburg IN 46112 Hendricks [317] 409-5065 08/15/20 21. Chaiperson's Full Name Designate Candidate as Chaiperson. Image: Conditional Condite Condite Conditiona Conditional Conditiona Conditional Condite	17. City	State	ZIP Code	18. Cou	nty		19. Telephone				rganization	Date
Brian E. Bewley 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) 4974 Devonshire Drive () 27. Telephone (Day) 28. Telephone (Evening) 25. City N 46167 Hendricks 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 baces or maintains fur State Bank axd for Cwast Banks 31. Salaries and Reimbursements (Will the committee pay the candidate reimbursement (Give brief statement explaning purpose of an exploratory committee, appoint the following person as treasurer of the Committee, appoint the following person as Treasurer of the Committee, appoint the following person as Treasurer of the Committee, and street, city, state, and ZIP code) Check if this is a new treasurer. 33. Treasurer of the Committee. Ashley Slager Signature of the committee Chairperson committee and street, city, state, and ZIP code) Check if this is a new treasurer. 35. FAX (Optional) 36. E-mail Address (Optional) 214 Beathrow Court IN 46112 Hendricks 39. Telephone (Day) 40. Telephone (Evening) 37. City IN 46112 As Courty Hendricks 17.08, 606-8920 0	Brownsburg	IN	46112	46112 Hendricks			(317) 4	09-5065	(mm/dd/yy) 08/15/2023			023
22. Mailing Address (number and street, cky state, and ZIP code) Check if this is a new address. 23. FAX (Optional) 24. E-mail Address (Optional) 4974 Devonshire Drive IN ZIP Code 26. County 27. Telephone (Day) 28. Telephone (Evening) 9. 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 and low C Kast Bank 28. Telephone (Cay) 28. Telephone (Evening) 30. Exploratory Committee (Give binef statement explaving purpose of an exploratory committee appoint the following person as Treasurer's Full Name Designate candidate as treasurer. In State So of the foregoing Person Appointed Treasurer Signature of the Committee Chairperson as Ashley Slager 33. Treasurer's Full Name Designate candidate as treasurer. Check if this is a new address. 25. FAX (Optional) 36. E-mail Address (Optional) 31. City State ZIP Code 38. County Signature of the Committee Chairperson 33. Treasurer's Full Name Designate candidate as treasurer. Check if this is a new address. 35. FAX (Optional) 36. E-mail Address (Optional) 34. Mailing Address (number and street, cty, state, and ZIP code) Check if this is a new address. 35. FAX (Optional) 36. E-mail Address (Optional) 35. Telephone (Day) Hendricks <t< td=""><td>21. Chairperson's Full Name</td><td>] Designate Candid</td><td>ate as Chairpe</td><td>rson. 🗹 (</td><td>Check if this is</td><td>s a new c</td><td>hairperson</td><td></td><td></td><td></td><td></td><td></td></t<>	21. Chairperson's Full Name] Designate Candid	ate as Chairpe	rson. 🗹 (Check if this is	s a new c	hairperson					
22. Mailing Address (number and street, cky state, and ZIP code) Check if this is a new address. 23. FAX (Optional) 24. E-mail Address (Optional) 4974 Devonshire Drive IN ZIP Code 26. County 27. Telephone (Day) 28. Telephone (Evening) 9. 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 and low C Kast Bank 28. Telephone (Cay) 28. Telephone (Evening) 30. Exploratory Committee (Give binef statement explaving purpose of an exploratory committee appoint the following person as Treasurer's Full Name Designate candidate as treasurer. In State So of the foregoing Person Appointed Treasurer Signature of the Committee Chairperson as Ashley Slager 33. Treasurer's Full Name Designate candidate as treasurer. Check if this is a new address. 25. FAX (Optional) 36. E-mail Address (Optional) 31. City State ZIP Code 38. County Signature of the Committee Chairperson 33. Treasurer's Full Name Designate candidate as treasurer. Check if this is a new address. 35. FAX (Optional) 36. E-mail Address (Optional) 34. Mailing Address (number and street, cty, state, and ZIP code) Check if this is a new address. 35. FAX (Optional) 36. E-mail Address (Optional) 35. Telephone (Day) Hendricks <t< td=""><td>Brian E. Bewley</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	Brian E. Bewley											
4974 Devonshire Drive () 25. City State ZIP Code 26. County () 27. Telephone (Day) 28. Telephone (Evening) Pittsboro IN 46167 Hendricks () 27. Telephone (Day) 28. Telephone (Evening) 29. Bank or Other Depositories (List all banks or other depositories in which the committee deposits lunds, holds accounts, rents safely deposit boxes or maintains fur State Bank axb for C has's 8 axb 30. Exploratory Committee (Give bief statement explaving purpose of an exploratory committee only) 31. Salaries and Reimbursements (Will the committee pay the candidate reimbursement for fost wages? If Yes, attach a copy of the contract.) IN SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14) 32. 1, as Chairperson of the foregoing committee, appoint the following person as Treasurer's Full Name Designate candidate as treasurer. Signature of the Committee Chairperson 33. Treasurer's Full Name Designate candidate as treasurer. C heck if this is a new address. 35. FAX (Optional) 36. E-mail Address (Optional) 2148 Heathrow Court IN 46112 Hendricks 708, 606-8920 () SteetTION E. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15) State 21P Code 38. County 19. Telephone (Day) 40. Telephone (Even		eet, city, state, and ZIP o	ode) 🗌 Cheo	ck if this is a	new address.	23. FA	X (Optional	1) 2	4. E-ma	il Address (Optio	nal)	
23. Sing IN 46167 Hendricks (317) 409-5065 () 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 fur State Bank and for Chast Bank () 30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.) 31. Salaries and Reimbursements (Will the committee pay the candidate reimbursement for lost wages? If Yes, attach a copy of the contract.) () SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14) 31. Salaries and Reimbursements (Will the committee pay the candidate reimbursement for lost wages? If Yes, attach a copy of the contract.) () SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14) Signature of the Committee Chairperson committee appoint the following person as Treasurer of the Committee. Signature of the committee Chairperson Ashley Slager 33. Treasurer's Full Name Designate candidate as treasurer. C Check if this is a new address. 35. FAX (Optional) 36. E-mail Address (Optional) 2148 Heathrow Court IN 46112 Hendricks 39. Telephone (Day) 40. Telephone (Evening) 37. City State ZIP Code 38. County 39. Telephone (Day) 40. Telephone (Evening) Committee. I and the chairperson of a campaing finance committee (except as permitted for a candidate comm						1	1					
Pittsboro IN 46167 Hendricks (317) 409-5065 () 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 fur State Bank and for Chast Bank and for Chast Bank 30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only) 31. Salaries and Reimbursements (Will the committee pay the candidate reimbursement for lost wages? If Yes, attach a copy of the contract.) Image: Solarity of the contract.) SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14) 33. Salaries and Reimbursements (Will the committee pay the candidate a committee, appoint the following person as Treasurer of the Committee. Signature of the committee Chairperson 33. Treasurer's Full Name Designate candidate as treasurer. Check if this is a new address. 35. FAX (Optional) 36. E-mail Address (Optional) 2148 Heathrow Court IN 46112 Hendricks 38. County 39. Telephone (Day) 40. Telephone (Evening) 37. City State ZIP Code 38. County Image: Corect of the committee and responsibilities of Treasurer of this Signature of Person Accepting Appointent Committee. I and the chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-15). Signature of Person Accepting Appointent <td< td=""><td>25. City</td><td>State</td><td>ZIP Code</td><td colspan="3">le 26. County</td><td colspan="2">27. Telephone (Day)</td><td></td><td colspan="3">28. Telephone (Evening)</td></td<>	25. City	State	ZIP Code	le 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 fur State Bank and or Chase Bank 30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only) 31. Salaries and Reimbursements (Will the committee pay the candidate reimbursement for lost wages? If Yes, attach a copy of the contract.) SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14) 32. 1, as Chairperson of the foregoing Committee, appoint the following person as Treasurer of the Committee. 33. Treasurer's Full Name Designate candidate as treasurer. Ashley Slager 34. Mailing Address (number and street, city, state, and ZiP code) IN 46112 Hendricks 38. County Hendricks 708, 606-8920 () SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15) SIgnature of Person Accept the dulies and responsibilities of Treasurer of this Signature of Person Accept the dulies and responsibilities of Treasurer of this Signature of Person Accept the dulies and responsibilities of Treasurer of the statement. To the chairperson of a campaign finance committee (except as permitted for a candidate and the duly appointed Chairperson Brian E. Bewley		IN	46167	7 Hendricks			,317,409-5065					
State Bank and or Crost Bank 30. Exploratory Committee (Give bnef statement explaning purpose of an exploratory committee only.) 31. Salaries and Reimbursements (Will the committee pay the candidate and copy of the contract.) SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14) 31. Salaries and Reimbursements (Will the committee pay the candidate are imbursement for lost wages? If Yes, attach a copy of the contract.) SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14) Signature of the Committee Chairperson of the foregoing Committee. 32. I, as Chairperson of the foregoing Committee. Person Appointed Treasurer 33. Treasurer's Full Name Designate candidate as treasurer. Signature of the Committee Chairperson 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) 2148 Heathrow Court IN 46112 Hendricks 708 b606-8920 40. Telephone (Evening) 37. City State ZIP Code 38. County Brownsburg Signature of Person Accepting Appointment 41. 1 give notice that 1 accept the duties and responsibilities of Treasurer of this Signature of Person Accepting Appointment Committee. I am not the chairperson of a campaign finance committee and that we have examined this statement. To the best of our knowledge and belief it is true, correct and complete. <		List all banks or othe	r depositories i	in which the o	committee dej	posits fur	nds, holds a	accounts, rent	s safety	deposit boxes or r	naintains fur	nds.)
30. Exploratory Committee (Give bind statement explaining purpose of an exploratory committee only) 31. Salaries and Reimbursements (Will the committee pay the candidate reimbursement for lost wages? If Yes, attach a copy of the contract.) 30. Exploratory Committee (Give bind statement explaining purpose of an exploratory committee only) 31. Salaries and Reimbursements (Will the committee pay the candidate reimbursement for lost wages? If Yes, attach a copy of the contract.) 30. Exploratory Committee (Give bind statement explaining purpose of an exploratory committee only) 31. Salaries and Reimbursements (Will the committee pay the candidate reimbursement for lost wages? If Yes, attach a copy of the contract.) 31. Salaries and Reimbursements (Will the committee only) 31. Salaries and Reimbursements (Will the committee pay the candidate reimbursement for lost wages? If Yes, attach a copy of the contract.) 32. I, as Chairperson of the foregoing committee appoint the following person as Treasurer of the Committee. Signature of the Committee Chairperson 33. Treasurer's Full Name Designate candidate as treasurer. Image: Committee chairperson Signature of the Committee Chairperson 34. Mailing Address (number and street, city, state, and ZIP code) Check if this is a new address. S. FAX (Optional) G. E-mail Address (Optional) 2148 Heathrow Court IN 46112 Hendricks J. O8 606-8920 Image: Committee Chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-7). </td <td></td>												
Bit. Exploringly Committee (and only and the data an				pioratory comm	ittee only.) 31	. Salarie	s and Rein	nbursements	(Will the	e committee pay ti	he candidate	a salary or
32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee. Person Appointed Treasurer Ashley Slager Signature of the Committee Chairperson 33. Treasurer's Full Name Designate candidate as treasurer. Image: Chairperson Signature of the Committee Chairperson 33. Treasurer's Full Name Designate candidate as treasurer. Image: Chairperson Signature of the Committee Chairperson 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) 2148 Heathrow Court () 39. Telephone (Day) 40. Telephone (Evening) 37. City State ZIP Code 38. County 39. Telephone (Day) 40. Telephone (Evening) 41. I give notice that 1 accept the duties and responsibilities of Treasurer of this Signature of Person Accepting Appointment 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. Date (mm/dd/yy) 42. Typed or Printed Name of Chairperson Signature of Chairperson	So, Exploratory committee joins a	ner automon orphannig	particular of an end									
32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee. Person Appointed Treasurer Ashley Slager Signature of the Committee Chairperson 33. Treasurer's Full Name Designate candidate as treasurer. Image: Chairperson Signature of the Committee Chairperson 33. Treasurer's Full Name Designate candidate as treasurer. Image: Chairperson Signature of the Committee Chairperson 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) 2148 Heathrow Court () 39. Telephone (Day) 40. Telephone (Evening) 37. City State ZIP Code 38. County 39. Telephone (Day) 40. Telephone (Evening) 41. I give notice that 1 accept the duties and responsibilities of Treasurer of this Signature of Person Accepting Appointment 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. Date (mm/dd/yy) 42. Typed or Printed Name of Chairperson Signature of Chairperson			EASURE	P /IC 3-9	-1-14)							
committee, appoint the following person as Ashley Slager Treasurer of the Committee. 33. Treasurer's Full Name Designate candidate as treasurer. Image: Check if this is a new treasurer. Image: Check if this is a new treasurer. Ashley Slager Ashley Slager Image: Check if this is a new treasurer. 34. Mailing Address (number and street, city, state, and ZIP code) Image: Check if this is a new address. Image: Check if this is a	SECTION C. APPOIN	f the foregoin	a Person Ap	pointed Trea	asurer			Signature o	f the Co	mmittee Chairpe	rson	
Treasurer of the Committee. Astricy Stager 33. Treasurer's Full Name Designate candidate as treasurer. Image: Check if this is a new treasurer. Ashley Slager 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) 2148 Heathrow Court () 39. Telephone (Day) 40. Telephone (Evening) 37. City State ZIP Code 38. County 39. Telephone (Day) 40. Telephone (Evening) Brownsburg IN 46112 Hendricks (708, 606-8920) () SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15) 11. I give notice that I accept the duties and responsibilities of Treasurer of this permitted for a candidate committee under IC 3-9-1-7). Signature of Person Accepting Appointment Committee (except as permitted for a 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. Date (mm/dd/yy) 08/15/2023 42. Typed or Printed Name of Chairperson Signature of Chairperson Date (mm/dd/yy) 08/15/2023 Brian E. Bewley Mut. Mut. 08/15/2023 08/15/2023 08/15/2023	committee, appoint the foll					T			6 Ma			
Ashley Slager 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) 2148 Heathrow Court () 39. Telephone (Day) 40. Telephone (Evening) 37. City State ZIP Code 38. County 39. Telephone (Day) 40. Telephone (Evening) Brownsburg IN 46112 Hendricks (708) 606-8920 () SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15) Signature of Person Accept the duties and responsibilities of Treasurer of this Signature of Person Accepting Appointment 41. 1 give notice that 1 accept the duties and responsibilities of Treasurer of this Signature of Person Accepting Appointment Committee. I am not the chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-7). 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. Date (mm/dd/yy) 42. Typed or Printed Name of Chairperson Signature of Chairperson Date (mm/dd/yy) Brian E. Bewley Signature of Chairperson Date (mm/dd/yy) Not Mark	Treasurer of the Committee.		Astricy					4	7	. 50		
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) 2148 Heathrow Court () () 36. E-mail Address (Optional) 37. City State ZIP Code 38. County () Brownsburg IN 46112 Hendricks (708, 606-8920) 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 Committee under IC 3-9-1-7). SECTION E. CERTIFICATION OF STATEMENT Vecertify 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. Date (mm/dd/yy) 42. Typed or Printed Name of Chairperson Signature of Chairperson Date (mm/dd/yy) Brian E. Bewley M. M. M. 08/15/2023 P		Designate candidate	as treasurer.	Check	if this is a new	v treasure	er.	V		-0-1		
2148 Heathrow Court () 37. City State ZIP Code 38. County 39. Telephone (Day) 40. Telephone (Evening) Brownsburg IN 46112 Hendricks (708) 606-8920 () SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15) Signature of Person Accepting Appointment 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. Date (mm/dd/yy) 42. Typed or Printed Name of Chairperson Signature of Chairperson Date (mm/dd/yy) Brian E. Bewley M. M. M. 08/15/2023 Point Middle Signature						05 54			- E			
37. City State ZIP Code 38. County 39. Telephone (Day) 40. Telephone (Evening) Brownsburg IN 46112 Hendricks (708, 606-8920 (0) SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15) Signature of Person Accepting Appointment Signature of Person Accepting Appointment 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 Signature of Person Accepting Appointment SECTION E. CERTIFICATION OF STATEMENT Vecertify 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. Date (mm/dd/yy) 42. Typed or Printed Name of Chairperson Signature of Chairperson Date (mm/dd/yy) Brian E. Bewley W. W. W. 08/15/2023 Point Middition (Middition (M	and the second	reet, city, state, and ZIP c	ode) 🗌 Chei	ck if this is a	new address.	35. FA	X (Optional	0 3	6. E-ma	II Address (Optio	nai)	
Brownsburg IN 46112 Hendricks (708) 606-8920 SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15) 41. 1 give notice that 1 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. Date (mm/dd/yy) 42. Typed or Printed Name of Chairperson Brian E. Bewley Signature of Chairperson W. W. W. Date (mm/dd/yy) 08/15/2023 08/15/2023	2148 Heathrow Court					()	100		10 -		
SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15) 41. 1 give notice that I accept the duties and responsibilities of Treasurer of this Signature of Person Accepting Appointment Committee. I am not the chairperson of a campaign finance committee (except as Signature of Person Accepting Appointment permitted for a candidate committee under IC 3-9-1-7). 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. FOR OFFICE USE OF 42. Typed or Printed Name of Chairperson Signature of Chairperson Date (mm/dd/yy) Brian E. Bewley W. W. W. 08/15/2023	37. City				10 m 20m		and the second s				(Evening)	
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 U and the chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-7). SECTION E. CERTIFICATION OF STATEMENT FOROFFICE USE OF Committee 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. FOROFFICE USE OF Committee I and that we have and that we have and the duly appointee of Chairperson of the Committee I and the duly appointee of Chairperson Brian E. Bewley Signature of Chairperson I and the duly appointee I and th	Brownsburg	IN	46112	Hend	Iricks		(708) 6	06-8920		()		
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 for a candidate committee under IC 3-9-1-7). SECTION E. CERTIFICATION OF STATEMENT FOROFFICE USE Of the committee 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. FOROFFICE USE OF the committee of Chairperson of the Committee and that we have have belief it is true, correct and complete. 42. Typed or Printed Name of Chairperson Brian E. Bewley Signature of Chairperson Signature of Chairperson OR (Marce C	SECTION D. ACCEPT	ANCE OF AP	POINTME	NT (IC 3	-9-1-15)							
permitted for a candidate committee under IC 3-9-1-7). Output SECTION E. CERTIFICATION OF STATEMENT FOR OFFICE USE OF 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. FOR OFFICE USE OF 42. Typed or Printed Name of Chairperson Signature of Chairperson Date (mm/dd/yy) Brian E. Bewley 08/15/2023 P	41. I give notice that I acc	cept the duties	and respon	sibilities (of Treasure	er of th	nis Signa	iture of Per	son Ac	cepting Appoi	ntment	52
SECTION E. CERTIFICATION OF STATEMENT FOROFFICE USE OF 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. FOROFFICE USE OF 42. Typed or Printed Name of Chairperson Signature of Chairperson Date (mm/dd/yy) Brian E. Bewley 08/15/2023 P	Committee. I am not the committee for a candidate con	mairperson of a	campaign 3-9-1-7).	nnance co	sminitee (e	except	as	ash	M	Slagen	02	1
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. Image: Complete is the compl	SECTION E. CERTIFIC	CATION OF S	TATEMEN	T						FOROFFI	CE USE (ONLY
examined this statement. To the best of our knowledge and belief it is true, correct and complete. 22. Typed or Printed Name of Chairperson Date (mm/dd/yy) Brian E. Bewley V. Y. M. 08/15/2023	We certify as the candidat	e and the duly	appointed	Chairpers	on of the	Commi	ttee and	that we h	nave	2	5	1
Brian E. Bewley K. T. M. 08/15/2023	examined this statement. To	the best of our k				rrect an	d comple	ete.	_	ž.		-1
Bhan L. Dewley		Chairperson	Signature	15011	And the second se			12	~§ '	Married Woman		
			K	1				3	61	-0	÷ n	
45. Typed of Thinked Hand of Schule	43. Typed or Printed Name o	f Candidate			ye			Date (mm/dd/yy)		-5		S
Joshua D. Adair John D. Adam 08/15/2023	Joshua D. Adair		for I	Adam	C					F.	يي	03
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	percon who knowingly files a frau	dulent report commi	ts a Level 6 D	felony (IC 3	14-14-1-13) A	person v	vho tails to	file a comple	ete or	12	12	CKS COUNTY