



CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE
 State Form 4604 (R14 / 10-17)
 Indiana Election Division (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

(CFA-1)

2019 JAN -9 AM 8:11

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. → 32-19-001

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

2. Last Name: GRACEY First Name: JEFFREY Middle Name: OWEN Nickname: JEFF
 3. Type of Committee (Check one)
 Candidate's Principal Committee
 Exploratory Committee
 4. Mailing Address (number and street, city, state, and ZIP code): 443 NORTH ODELL ST.
 5. FAX (Optional):
 6. E-mail Address (Optional): JTGRAVEY@gmail.com
 7. City: Brownsburg State: IN ZIP Code: 46112 8. County: Hendricks 9. Telephone (Day): (317) 443-2070 10. Telephone (Evening): (317) 443-2070
 11. Party Affiliation: Democratic Libertarian Republican Other
 12. Office Sought (Include district number, if any. Not required for an 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.) Check if this is a new name.
 The Committee to Elect Jeff Gracey
 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):
 443 NORTH ODELL ST.
 17. City: Brownsburg State: IN ZIP Code: 46112 18. County: Hendricks 19. Telephone: (317) 443-2070 20. Committee Organization Date (mm/dd/yy):
 21. Chairperson's Full Name Designate Candidate as Chairperson. Check if this is a new chairperson.
 THOMAS K. LACEY
 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):
 19 TIMBER LAKE
 25. City: Brownsburg State: IN ZIP Code: 46012 26. County: Hendricks 27. Telephone (Day): (317) 852-8375 28. Telephone (Evening): SAME
 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.)
 Huntington 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. Person Appointed Treasurer: Signature of the Committee Chairperson:
 33. Treasurer's Full Name Designate candidate as treasurer. Check if this is a new treasurer.
 Brian Douglas Foster Overmars
 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):
 1604 Woodstock Dr. bovermars@gmail.com
 37. City: Brownsburg State: IN ZIP Code: 46112 38. County: Hendricks 39. Telephone (Day): (317) 670-4831 40. Telephone (Evening): (317) 670-4831

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:
 Brian Overmars

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: THOMAS K. LACEY Signature of Chairperson: Date (mm/dd/yy): 1-6-19
 43. Typed or Printed Name of Candidate: JEFFREY GRACEY Signature of Candidate: Date (mm/dd/yy): 01-06-19

FOR OFFICE USE ONLY

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).