



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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If Yes, please enter the file number in this box. →</i>						32-24-023
SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.						
2. Last Name Hudelson		First Name Neil		Middle Name James	Nickname	
4. Mailing Address (number and street, city, state, and ZIP code) 46 West Main Street, Brownsburg, IN 46112						3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee
5. FAX (Optional)				6. E-mail Address (Optional) njhudelson@gmail.com		
7. City Brownsburg	State IN	ZIP Code 46112	8. County Hendricks	9. Telephone (Day) (812) 653-0169	10. Telephone (Evening) (812) 653-0169	
11. Party Affiliation <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input type="checkbox"/> Republican <input checked="" type="checkbox"/> Other <u>Unaffiliated</u>			12. Office Sought (Include district number, if any. Not required for an exploratory committee.) Brownsburg School Board, Lincoln Township 1			
SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.						
13. Full Name of Committee (Do not abbreviate.) <input checked="" type="checkbox"/> Check if this is a new name. Committee to Elect Neil Hudelson for School Board						
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 46 West Main Street, Brownsburg, IN 46112						15. FAX (Optional)
16. E-mail Address (Optional) njhudelson@gmail.com						
17. City Brownsburg	State IN	ZIP Code 46112	18. County Hendricks	19. Telephone (812) 653-0169	20. Committee Organization Date (mm/dd/yyyy) 05/30/2024	
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Neil Hudelson						
22. Mailing Address (number and street, city, state, and ZIP code) <input checked="" type="checkbox"/> Check if this is a new address. 46 West Main Street, Brownsburg, IN 46112						23. FAX (Optional)
24. E-mail Address (Optional) njhudelson@gmail.com						
25. City Brownsburg	State IN	ZIP Code 46112	26. County Hendricks	27. Telephone (Day) (812) 653-0169	28. Telephone (Evening) (812) 653-0169	
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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 Brandon Hilts		Signature of the Committee Chairperson 	
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input checked="" type="checkbox"/> Check if this is a new treasurer. Brandon Fry Hilts						
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 8442 Seafeld Drive, Brownsburg, IN 46112						35. FAX (Optional)
36. E-mail Address (Optional) bfhilts@gmail.com						
37. City Brownsburg	State IN	ZIP Code 46112	38. County Hendricks	39. Telephone (Day) (260) 2234678	40. Telephone (Evening) (260) 2234678	
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 Neil Hudelson		Signature of Chairperson 		Date (mm/dd/yyyy) 06/03/2024		
43. Typed or Printed Name of Candidate Neil Hudelson		Signature of Candidate 		Date (mm/dd/yyyy) 06/03/2024		
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

2024 JUN 13 AM 11:00

Morgan Pire

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CLERK OF SUPERIOR COURT