



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. →*

2022-9

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

| | | | | | | | |
|---|--|---------------------------|-------------------|--|----------|---|-------------------------|
| 2. Last Name Thomas | | First Name Christopher | | Middle Name Troy | Nickname | 3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee | |
| 4. Mailing Address (number and street, city, state, and ZIP code) 1550 W Isaac Rd #1447 | | | | 5. FAX (Optional) | | 6. E-mail Address (Optional) | |
| 7. City Bloomington | | State IN | ZIP Code 47403 | 8. County Monroe | | 9. Telephone (Day) | 10. Telephone (Evening) |
| 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.) Monroe County Sheriff | | | |

SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

| | | | | | | | |
|---|--|-------------|-------------------|---|--|--|--|
| 13. Full Name of Committee (Do not abbreviate.) <input type="checkbox"/> Check if this is a new name. Troy Thomas For Monroe County Sheriff | | | | | | | |
| 14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 4835 E State Road 46 | | | | 15. FAX (Optional) | | 16. E-mail Address (Optional) djyoung7000@gmail.com | |
| 17. City Bloomington | | State IN | ZIP Code 47401 | 18. County Monroe | | 19. Telephone () 812-322-6164 | 20. Committee Organization Date (mm/dd/yy) 01/01/22 |
| 21. Chairperson's Full Name <input type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Carven Thomas | | | | | | | |
| 22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 5392 W Stonewood, Bloomington | | | | 23. FAX (Optional) | | 24. E-mail Address (Optional) | |
| 25. City Bloomington | | State IN | ZIP Code | 26. County Monroe | | 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.) First Credit Union | | | | | | | |
| 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 Donald J Young | | Signature of the Committee Chairperson <i>Carven Thomas</i> | | |
| 33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. Donald Joseph Young | | | | | | | |
| 34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 4835 E State Road 46 | | | | 35. FAX (Optional) | | 36. E-mail Address (Optional) djyoung7000@gmail.com | |
| 37. City Bloomington | | State IN | ZIP Code 47401 | 38. County Monroe | | 39. Telephone (Day) (812) 322-6164 | 40. Telephone (Evening) (812) 322-6164 |

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 <i>Donald J Young</i> | |
|--|--|--|--|

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 Carven Thomas | | Signature of Chairperson <i>Carven Thomas</i> | | Date (mm/dd/yy) 01/06/22 | |
| 43. Typed or Printed Name of Candidate Troy Thomas | | Signature of Candidate <i>Troy Thomas</i> | | Date (mm/dd/yy) 01-06-2022 | |

FILED

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CLERK MONROE CIRCUIT COURT

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).

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