

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.

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IS THIS AN AMENDMENT	T? ☐ Yes	No If Yes,	please e	enter the file i	numbe	r in this box	:.→		
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McClellan	∫ J∈	essica	L					Exploratory Com	nittee**
Mailing Address (number and street,	, city, state, and ZI	P code)	• -	5. FAX (O	ptional)		6. E-mail	Address (Optional)	3
559 W Dogwood Ln	•							\$	(e
City	State	ZIP Code	8. County	, ()	9. Teli	ephone (Day)		10. Telephone (Evenin	g)
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Friends of Jessica McCl							(45° =11	Address (Ontional)	
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Bloomington	l in l	47404	Monro	e	(847	′ ₁ 987-3356	} ⁽	^{mm/dd/yy)} 6/27	/2023
	Designate Car	ndidate as Chairperso	n. □ Cl	neck if this is a new	v chairpe	rson.			
Jessica McClellan									
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9. Bank or Other Depositories (Lis	st all banks or o	other depositories in I	which the co	mmittee deposits	funds, ho	olds accounts, re	nts safety o	eposit boxes or maintair	s funds.)
German American Bank		-							
0. Exploratory Committee (Give brie		ining numose of an explo	ratory committe	ee only.) 131. Sala	ries and	Reimbursemen	ts (Will the	committee pay the cand	date a salar
	ar statement expin	ining purpose of all expres		reimburs	ement fo	r lost wages? If	Yes, attach	a copy of the contract.)	☐ Yes 🗹
County Auditor									
SECTION C. APPOINT	MENT OF	TREASURER	(IC 3-9-	1-14)		Ci	of the Con	mittee Chairperson	
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