CANDIDATE'S STATEMENT OF ORGANIZATION AND
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

State Form 4604 (R12/9-09)
Indiana Election Commission (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.

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

2. Last Name
Addington

First Name
Brent

Middle Name
Franklin

Nickname

3. Type of Committee (Check one)
☐ Candidate's Principal Committee
☐ Exploratory Committee

5. FAX (Optional)
Brent@Addington.com

6. E-mail Address (Optional)

7. City
Lawrence

State
IN

ZIP Code
46236

8. County
Marion

9. Telephone (Day)
(317) 908-4262

10. Telephone (Evening)
(317) 908-4262

11. Party Affiliation
☐ Democratic
☐ Libertarian
☐ Republican
☐ Other

12. Office Sought (Include district number, if any. Not required for an exploratory committee.)
Lawrence City Council – District 3

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

13. Full Name of Committee (Do not abbreviate)
Friends of Brent Addington

14. Mailing Address
P. O. Box 36393

15. FAX (Optional)

16. E-mail Address (Optional)

17. City
Lawrence

State
IN

ZIP Code
46236

18. County
Marion

19. Telephone (Day)
(317) 345-0727

20. Committee Organization Date (MM-DD-YY)
01-30-15

21. Chairperson's Full Name
Harry Richard (Rick) Whitener

22. Mailing Address
5501 N. Kenwood Ave

23. FAX (Optional)

24. E-mail Address (Optional)
Whitener.rick@att.net

25. City
Indianapolis

State
IN

ZIP Code
46208

26. County
Marion

27. Telephone (Day)
(317) 345-0727

28. Telephone (Evening)
(317) 345-0727

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.)

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.)
No ☐ Yes ☐

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. Signature of the Committee Chairperson
Harry Richard (Rick) Whitener

33. Treasurer's Full Name
Harry Richard (Rick) Whitener

34. Mailing Address
5501 N. Kenwood Ave

35. FAX (Optional)

36. E-mail Address (Optional)

37. City
Indianapolis

State
IN

ZIP Code
46208

38. County
Marion

39. Telephone (Day)
(317) 345-0727

40. Telephone (Evening)
(317) 345-0727

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
Harry Richard Whitener

Signature of Chairperson

Date (MM-DD-YY)
1/30/15

43. Typed or Printed Name of Candidate
Brent Franklin Addington

Signature of Candidate

Date (MM-DD-YY)
1/30/15

Warning: State law requires that any change in this information be reported within 10 days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Class 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).

FILED
JAN 30 2015
Myra A. Eldridge