REGULAR PARTY COMMITTEE
STATEMENT OF ORGANIZATION
State Form 46413 (R5/0-06)
Indiana Election Commission (IC 3-9-1-3 and IC 3-9-1-4)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK.
SEE INSTRUCTIONS ON REVERSE SIDE.

FILE NUMBER

1. IS THIS AN AMENDMENT? ☐ No ☑ Yes If Yes, please enter the file number in this box →

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

2. Full Name of Committee (Do not abbreviate) ☐ Check if this is a new name

Libertarian Party of Marion County

LPMC

3. Acronym or Abbreviated Name (If any)

4. Mailing Address (Address where all campaign finance correspondence is received) ☐ Check if this is a new address

156 E. Market St. Ste 405

Chair@indylp.org

5. E-mail Address (Optional)

6. City

Indianapolis

6. Fax (Optional) ( )

7. Telephone ( )

669-5663

9. Committee Organization Date (MM/DD/YY) 01/12/2000

10. Is this committee registered with the Federal Election Commission? ☐ Yes ☑ No

11. Type of Regular Party Committee (Check one)

☐ National ☐ State ☐ Congressional District ☑ County ☐ City ☐ Town

12. Party Affiliation (Check one)

☐ Democratic ☐ Libertarian ☐ Republican ☐ Other

13. Chairperson's Name ☑ Check if this is a new chairperson

Christopher Jason Mayo

Cjm02082@yahoo.com

14. E-mail Address (Optional)

15. Telephone (Day) (317) 467-0555

16. Telephone (Evening) (317) 982-2039

17. Treasurer's Name ☑ Check if this is a new treasurer

Jo R Coleman

18. E-mail Address (Optional)

ejcoleman@sbcglobal.net

19. Mailing Address ☐ Check if this is a new address

8040 Red Barn Circle

20. Mailing Address ☐ Check if this is a new address

314 N North Folk St Indianapolis IN 46224

21. Telephone (Day) (317) 293-1597

22. Telephone (Evening) (317) 293-1597

23. Custodian of Records' Name ☑ Check if this is a new custodian

24. E-mail Address (Optional)

24. Mailing Address ☐ Check if this is a new address

Catherine Sipe

CSipe@butler.edu

25. Mailing Address ☑ Check if this is a new address

26. Bank or Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, maintains safety deposit boxes or maintains funds.)

Huntington National Bank, PayPal

SECTION B. APPOINTMENT OF TREASURER (IC 3-9-1-14)

28. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee.

Jo R Coleman

Signature of the Committee Chairperson

SECTION C. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)

30. I give notice that I accept the duties and responsibilities of Treasurer of this Committee.

I am not the chairperson of any other campaign finance committee.

Jo R Coleman

Signature of Treasurer

31. Typed or Printed Name of Treasurer

Jo R Coleman

Date (MM-DD-YY) 1/19/2015

SECTION D. CERTIFICATION OF STATEMENT

32. I certify that I am the duly appointed Chairperson of the Committee and have examined this statement. To the best of my knowledge and belief it is true, correct and complete.

Christopher J Mayo

Signature of Chairperson

33. Typed or Printed Name of Chairperson

Date (MM-DD-YY) 1/19/2015

Warning: Any information contained in this statement may not be copied for sale or used for any commercial purpose. (IC 3-8-4-6) State law requires that any change in this information must 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).

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FILED

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