



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.

							FILE NUMBER
1. IS THIS AN AMENDMENT?	⊠ No	Yes If Yes,	please ente	r the file numl	ber in this bo	x →	He-18-01
SECTION A. CANDIDATE	INFOR	MATION: Fill	in all applic	able boxes a	as fully and	accurate	ely as possible.
2. Last Name		t Name	Middle N		Nickname		3. Type of Committee (Check one)
mlan buch	- 1	C_{AC}	6				☐ Candidate's Principal Committee
1 H17/0011/10C		Sean	~		ļ		Exploratory Committee
4. Mailing Address				5. FAX (Optional))	6. E-mail A	ddress (Optional)
230 Walnut St					1-6547		
Michigan City	State IN	ZIP Code 46360	8. County La Por	te (2)	elephone (Day)	6547	10. Telephone <i>(Evening)</i> ()
11. Party Affiliation Democratic Libertarian Reput	olican 🔲	Other	12. (Office Sought (Inc	lude district numb	er, if any. No	t required for an exploratory committee.)
SECTION B. COMMITTEE	INFO	RMATION: Fill	in all applic	able boxes	as fully and	accurat	ely as possible.
13. Full Name of Committee (Do not abb	reviate)	√☑ Check if this is a	new name				
Friends of Fi	12pa	frice		L			
14. Malling Address Check if this is 230 Walnut	s a new ac St	idress		15. FAX (Optional)	ingd - 4547	1	Address (Optional)
17. City	State	ZIP Code	18. County	19.	Telephone	1.	0. Committee Organization Date
michigan City	IN.	46360	LaPor	H (2)	· · ·	~&n(*	MM-DD-YY) 01-04-18
21. Chairperson's Full Name Des	ignate Ca	ndidate as Chairpersoi	n Li Checkin	nis is a new chairp	erson		
22. Mailing Address						24. E-mail	Address (Optional)
25. City	State	ZIP Code	26. County	27.	Telephone (Day)	L	28. Telephone (Evening)
				İ.			
			L)		
29. Bank or Other Depositories (List all		other depositones in w	nich the committe	e deposits funds, i	noids accounts, re	nts satety di	eposit boxes or maintains funds.)
Horizan Bank							
30. Exploratory Committee (Give brief state	ement expla	ining purpose of an explora	tory committee only.)	31. Salaries an	d Reimbursemen	ts (Will the	committee pay the candidate a salary or
To receive and expen	v flin	ds to evolue	. the opportant	treimbursement	for lost wages? If	Yes, attach a	a copy of the contract.) No Yes
SECTION C. APPOINTME	NT OF	TREASURER (IC 3-9-1-14	ar once.			<i>y</i>
32. I, as Chairperson of the	o force	oing Person Appoi	nted Treesurer		Signaturo	of the Com	mittee Chairperson
committee, appoint the following	a nerec	n as		1 - 1	Signature	or the com	
Treasurer of the Committee.	g po.30	" " " 160 CT	7120	itrice		2/2	tellinge
33. Treasurer's Full Name 🔲 Design	ate candid	fate as treasurer 🔲	Check if this is a	new treasurer			
Terri Fitzpat	trice			Tag 75.27 (0.17		18 6 11	/
34. Mailing Address		agress		35. FAX (Optiona		36. E-maii	Address (Optional)
1230 Malnu-	1 2	Τ		(219,8	14-6547		
37. City	State	ZIP Code	38. County		Telephone (Day)		40. Telephone (Evening)
Michisan City	エル	46660	Later	te 1,0	(19) 874	-651	$ \cdot \rangle$
1 \		APPOINTMENT				•	,
41. I give notice that I accept to					Signature of Pa	reon Acc	epting Appointment
Committee. I am not the chairp	ierson (if a campaign fin	ance committe	e (except as		/ 1	
permitted for a candidate committ				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			izuti
SECTION E. CERTIFICAT							FOR OFFICE USE ONLY
We certify as the candidate and	d the d	uly appointed Ch	airperson of	the Committee	and that we	have	
examined this statement. To the b	est of o	ur knowledge and	belief it is true	, correct and c	omplete.	<u> </u>	FILED
42. Typed or Printed Name of Cha	irpersor	Signature of 0		7	Date (MM-DD-)	7)	
Sean Fitzpatri	W	Sem	10	and c	-10-01-	(8)	IN CLERKS OFFICE
43. Typed or Printed Name of Can		Signature of	Candidate	0.	Date (MM-DD-)	1 1	
San Fitzpatric		Len	In I	/leef	=01-04-1		JAN - 8 2018
Warning: State law requires that any c		his information be rep	orted within 10 c	lays of the change	e (IC 3-9-1-10). A	person	
who knowingly files a fraudulent report of	commits a	Class D felony (IC 3-	-14-1-13). A pers	on who fails to file	a complete or a	ccurate	
report as required by the Indiana Campai			s B misdemeano	· (IC 3-14-1-14), ai	nd may be subject	to civil	Konfufeholack
penalties (IC 3-9-4-16, IC 3-9-4-17, and IC	3-4-18 ن ر	<u>y-</u>					LERK OF LA PORTE CINCUIT COURT



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

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							FILE NUMBER
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SECTION A. CANDIDATE	INFOF	MATION: Fill	in all applica	ble boxes	as fully and	accurat	tely as possible.
2. Last Name		st Name	Middle Na	ne	Nickname		3. Type of Committee (Check one) Candidate's Principal Committee
Fitzpatrick		Sean	<u>S</u>				☐ Exploratory Committee
4. Mailing Address 230 Walnut	St			i. FAX (Optiona 219) STL	•	6. E-mail	Address (Optional)
7. City	State	ZIP Code	8. County	_	Telephone (Day)		10. Telephone (Evening)
Michitun City	IN	46360	Lator		19,874-6		1219,874-6547
11. Party Affiliation					clude district numb		lot required for an exploratory committee.)
Democratic Libertarian Reput				nunty (buncil		strict o
SECTION B. COMMITTEE	reviate)	Check if this is a	new name	Die Doxes	as runy and	accura	tery as possible.
friends of F	112F	Datricia				T "	
14. Mailing Address	a new al	ddress	I	15. FAX (Option		16. E-ma	il Address (Optional)
230 Walnut	21-			, ,	374.6547		
17. City	State	ZIP Code	18. County		Telephone	6547	20. Committee Organization Date (MM-DD-YY)
MICKIGANCIU	12	46360	Latorie		219,874	1039	(MM-DD-YY)
21. Chairperson's Full Name Des		indidate as Chairperso	on 🔲 Check if th	s is a new chair	person		
Sean fitzpatric				23. FAX (Option		154 5	
22. Mailing Address Check if this is 230 Walnut St	22. Mailing Address Check if this is a new address					24. E-mai	il Address (Optional)
25. City	State	, ZIP Code	26. County	2(9,874-) 27.	Telephone (Day)	<u>. </u>	28. Telephone (Evening)
Michigan City	IN	46360	LaPort	<u>ر</u> (219,874	4547	(219,874-6547
29. Bank or Other Depositories (List all	banks or	other depositories in v	which the committee	deposits funds	, holds accounts, re	nts safety	deposit boxes or maintains funds.)
Horizon Bank					•		
30. Exploratory Committee (Give brief state	ement expl	aining purpose of an exploi	ratory committee only.)				e committee pay the candidate a salary or a copy of the contract.) 🔼 No 🔲 Yes
ACCTION O APPOINTME	NIT OF	TDE ADUSES	//	rembursemen	i ioi iosi wages: ii	163, 811801	ra copy of the contract.) A No Tes
SECTION C. APPOINTME 32. I, as Chairperson of the					Signature	Aft His Co	mpittee Chairperson
committee, appoint the followin Treasurer of the Committee.			T 1	rice			Med
	ate cand	date as treasurer	Check if this is a	new treasurer			
1 - 1erri titzpatru	UC						
34. Mailing Address	_	address		35. FAX (Option	• .	36. E-ma	il Address (Optional)
230 Walnut s	<u>5</u> †			(219) 2	514-6547		
37. City	State	ZIP Code	38. County		Telephone (Day)	(40. Telephone (Evening)
Michigan City	Tu.	46360	Latort	- 11	<i>મ</i> ૧, ૪૧૫	$\varphi S u i$	29,874.6547
SECTION D. ACCEPTANC	E OF	APPOINTMEN	T (IC 3-9-1-15)			
41. I give notice that I accept Committee. I am not the chairs							
permitted for a candidate commit			tance committe	except as	'lle	: 1 tu	Ja tu
		F STATEMENT	•				FOR OFFICE USE ONLY
We certify as the candidate an	d the c	luly appointed Cl	hairperson of t			have	
examined this statement. To the base 42. Typed or Printed Name of Cha			l belief it is true, Chairperson	correct and	complete. Date (MM-DD-	w	F I L E D
Sean Fitzpatt		1 1/	Jan Jan C	Val		"	IN CLERKS OFFICE
43. Typed or Printed Name of Can		Signature of	Candidate	2	Date (MM-DD-	yy) .	
Sean Fitzpat	•	- //	Jet le	end;		,	JAN 1 7 2018
Warning: State law requires that any c							į
who knowingly files a fraudulent report of report as required by the Indiana Campai							hour sea a d
penalties (IC 3-9-4-16, IC 3-9-4-17, and I			33 D HIBUCHICANOI	10 0-14-1-14), 1	and may be subject	, o civii j	CLERK OF LA PORTE CIRCUIT COLL