



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

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? 🗌 Y		please enter the file			W-22-65
		in all applicable bo			
2. Last Name	First Name	Middle Name	Nickname *		3. Type of Committee (Check one) Candidate's Principal Committee
I PA W · N S R. 4. Mailing Address (number and street, city, state, a)	JAM ES	LE POY	J1/		Exploratory Committee
139515. 1050 W	- 1 / /	1/// 200	puonan	_	VIN EKROHTIER, COM
7 City Stat		7 763 7 0 () 8. County	9. Telephone (Day)	10.	Telephone (Evening)
WANATAh	46390	2 A PURTE	219 733-6		19.733-2865
11. Party Affiliation		12. Office Sou	ght (Include district numbe	er, if any. Not re	quired for an exploratory committee.)
Democratic Libertarian Republican			TOWAShip	DOGRA	
SECTION B. COMMITTEE INF 13. Full Name of Committee (Do not abbreviate)	ORMATION: Fill fe.) Check if this is a	in all applicable be	oxes as fully and	accurately	as possible.
JAMES LEROY IRWIN	SR.	. 			
14. Mailing Address (number and street, city, state, 13951 S, 1050W.	·	if this is a new address. 15.	FAX (Optional)	16. E-mail Add	Iress (Optional)
17. City State	1 1	18. County	19. Telephone	//	ommittee Organization Date
WANAIAH IA	1 46390	LATORIE	1219 733 2	865 111111	,
	Candidate as Chairperso	on. Check if this is a ne	w chairperson.		
22. Mailing Address (number and street, city, state,	AWIN, 5K,	if this is a new address. 23.	EAV (Optional)	24 E mail Ad	Iress (Optional)
13957 S. JOSO W	and ziP code)	it this is a new address. [23.)	24. E-IIIan Au	ness (Optional)
25. City + / State	1 2 .	26. County	27. Telephone (Day)	_	Telephone (Evening)
WANAIAH IN	1 46390	LAJORIE	319,733-30	4.74	9 133-2865
29. Bank or Other Depositories (List all banks	or other denositories in u	uhich the committee decosits	funde holde secounte co	nts safety deno.	sit boxes or maintains funds.)
· , ,	or other depositioned in it	mion the committee acposits	nunus, noids accounts, re	no concry cope	
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30. Exploratory Committee (Give brief statement of	explaining purpose of an explor	atory committee only.) 31. Sala reimbur	iries and Reimbursemen	ts (Will the com	mittee pay the candidate a salary or
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30. Exploratory Committee (Give brief statement of SECTION C. APPOINTMENT Committee, appoint the following per	explaining purpose of an explore OF TREASURER regoing Person Appoi	alory committee only.) 31. Sala reimburs (IC 3-9-1-14) inted Treasurer	aries and Reimbursemen sement for lost wages? If ` Signature	ts (Will the com/es, attach a co	mittee pay the candidate a salary or py of the contract.)
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30. Exploratory Committee (Give brief statement of SECTION C. APPOINTMENT Committee). 32. I, as Chairperson of the focommittee, appoint the following per Treasurer of the Committee. 33. Treasurer's Full Name Designate canded by Designate canded	DF TREASURER regoing Person Appoirson as JAMES indidate as treasurer. Check if E ZIP Code JE APPOINTMEN inties and responsite in of a campaign finaler IC 3-9-1-7). OF STATEMENT of duly appointed Check of our knowledge and	atory committee only.) 31. Sala reimburn (IC 3-9-1-14) Inted Treasurer LFROY FRW/ Check if this is a new treas If this is a new address. 35. 38. County LAFONTE T (IC 3-9-1-15) Consider of Treasurer of the committee (exception of the Combellief it is true, correct	Signature FAX (Optional) 39. Telephone (Day) 2/9 / 733 - 2/6 this Signature of Perpt as amittee and that we and complete.	ss (Will the committees, attach a constitution of the Committees) 36. E-mail Address 40. 40. 40. 40. From Accept	mittee pay the candidate a salary or py of the contract.) Yes No lee Chairperson dress (Optional) Telephone (Evening) Ing Appointment OR OFFICE USE ONLY
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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT?

Yes

No

(CFA-4)
Summary Sheet

FILE NUMBER
46-22-65
TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION	
1. Full Name of Committee (as on Statement of Organization)	name.
JIN IRWIN	And the second second
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number
J 1791	(219) 733-2865
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check if this is a new address.
5. City, State, ZIP Code	6. Party Affiliation (if applicable)
WANATA IN 46390-9731	DEM.
CANDIDATE INFORMATION (For Candidate's C	Committees Only)
7. Full Name of Candidate (Include any nickname.) 1. AMES IRWIY 1. INC.	8. Party Affiliation or If Independent Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.) CASS TOWNSh: p BORN	10. County of Residence
TYPE OF REPORT	CONVENTION CANDIDATES ONLY
11. Check one:	Check one:
(☐ Pre-Primary 🗷 Pre-Election ☐ Annual ☐ Nomination ☐ Other	Pre-Convention
Final / Disbands Committee (Lines 18, 19, and 20 must be '0'.) Outgoing Treasurer (Within ten (10) days amend Sta	element of Organization.) Post-Convention
12. Reporting Period (mm/dd/yy):	COLUMN A COLUMN B
From: January 3022 Through: 10-22-8022	
13. Cash on hand and investments at the beginning of this reporting period.	<u> </u>
14. Cash on hand and investments January 1, current year. ー のー	
CONTRIBUTIONS AND RECEIPTS	
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)	
15a. Itemized (Use Schedule A.)	
15b. Unitemized	TOTAL
	TOTAL
	TOTAL
EXPENDITURES	
(Note: These amounts include in-kind expenditures and loan repayments.)	
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	·
17b. Unitemized	
	BTOTAL
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL
19. Debts OWED BY the committee (Use Schedule D.)	-
20. Debts OWED TO the committee (Use Schedule E.)	
CERTIFICATION	- FÖB OFFICE RÜE OMFA
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS T	TOUR CORPORATION COMPLETE T IN EA ID
Signature of Treasurer / Title	Date (mm/dd/yy) CLERKS OFFICE
James Drur	10-20-2022
Signature of Candidate (if applicable)	Date (mm/dd/yy) 0CT 2 0 2022
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate	(IC 3-9-4-5) A person who knowingly ale 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	24-16, IC 3-9-4-17, IC 3-9-4-18) CLERK OF LA PORTE CIRCUIT COU



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER				
Page _	of				

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.	OAMES TAWIN (JIM) 13937 S., 1050 W WANATAH, PN 468909731	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	962.44 950.00	PEANTO-DATE	
2.		Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
3.		Contributions: Direct In-Kind (describe)			
4.		Other Receipts: Interest Loan Miscellaneous (specify) Contributions:	· .	÷	
	•	Other Receipts: Interest Loan Miscellaneous (specify)			
5.		Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
	SUBTOTAL TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY	\$		
L	(Enter total on ITE	M 15a of the Summary Sheet.)	\$		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as toan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER			
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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	<u> </u>	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
	Direct			
	In-Kind (describe)			
	In-Kino (describe)			
	Other Receipts:			
	Interest Loan]	
	1 = -			,
	Miscellaneous (specify)			
	•			
			<u> </u>	
2.	Contributions:			
	Direct			
	=			
	In-Kind (describe)			•
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
3.	Contributions:			
J.			•	
	Direct			
	☐ In-Kind (describe)			
	<u> </u>			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Miscellaneous (specify)			
	4	·		
4.	Contributions:			'
	Direct			
	n-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Miscellaneous (specify)			
	l			
5.	Contributions:			
	Direct			
	In-Kind (describe)			
				<u> </u>
	Other Receipts:			
	☐ Interest ☐ Loan			
	Miscellaneous (specify)			
	Initiation (appeary)			
· · · · · · · · · · · · · · · · · · ·				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY			
	1 15a of the Summary Sheet.)	\$		
(Enter total on 11E)	i isa oi me summary sneet.)			



(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
Page	of			

party committee).			Page	_ of
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
	HIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE NUMBER	
Page	of	

				<u> </u>	
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
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Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
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TOTAL OF ALL PA	\$				



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

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FILE NUMBER				
Page of				

			Page_	of _	
Enter Text of Public Question.	PUBLIC QUESTIO	NINFORMATION			
Enter Text of Labile Macation.					,
Type of Question: Statewide	Land				
Position: Supported Oppos					
	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT S OCCUPATION	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
Code		☐ Direct ☐ In-Kind	TEMOS	TERR TO DATE	(mm/dd/yy)
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•		Returned Contribution Other			
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	Enter total on 11 Em 11 a Of t	ne Summary Sneet.)			



REPORT OF RECEIPTS AND EXPENDITURES ... OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
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	TOTAL OF ALL	PAGES OF SCHEDULE	D ON THE LA	ST PAGE ONLY	
		(Enter total on IT	EM 19 of the S	ummary Sheet.)	\$

8872, and Form 990 (or 990EZ). Check with the IRS regarding the current version of these forms. These forms are accessible on the IRS's website at www.irs.gov/formspubs.

Please note, however, that federal legislation adopted in 2002 altered filing requirements for certain political organizations. Of significance, the law exempts, retroactive to July 1, 2000, state and local candidate and party committees from filing Form 8871, Form 8872, and Form 990 (or 990-EZ). To help explain this federal legislation, the IRS issued Fact Sheet 2002-13 in November 2002. This IRS publication describes the effect of this federal legislation and summarizes the filing requirements for different types of political committees. A copy of this publication may be viewed on the IRS's website at https://www.irs.gov/charities-non-profits/political-organizations/filing-requirements-1

If you have additional questions, you may also call the Internal Revenue Service at 1-800-829-1040 or consult your tax advisor regarding the tax liability of your political committee.

Raffle and Charity Gaming Information

In Indiana, only a "bona fide political organization" may conduct a raffle or other charity gaming activity for fundraising purposes. A "bona fide political organization" is defined as a party, committee, association, fund, or other organization organized and operated for directly or indirectly accepting contributions and making expenditures for an exempt purpose (as defined in Section 527 of the Internal Revenue Code). These organizations are the Democratic Party, the Republican Party, etc. A candidate's committee can qualify as a "bona fide political organization" for the limited purposes of IC 4-32.3-2-10 and IC 4-32.3-4-12. (See IC 4-32.3-2-10)

Please note that if the committee does qualify as an organization that may conduct a gaming event, there may be licensing requirements. The Indiana Gaming Commission regulates charity gaming activities. To learn more about the qualifications and licensing requirements contact the Indiana Gaming Commission at (317) 233-0046 or check the website at http://www.in.gov/igc/

Disclaimers

An individual, organization or a committee who expends money or solicits a contribution to finance a communication that expressly advocates the election or defeat of a clearly identified candidate must include a "disclaimer" in the communication. (IC 3-9-3-2.5) However, the Indiana disclaimer law does not apply to:

- 1) Communications concerning election to a federal office (these are governed by federal law and regulations).
- 2) Communications about a public question.
- Political messages on radio, television, or the Internet. (In general, state law does not regulate these media. For information about disclaimers required for state and local candidates for radio, television, or cable contact the Federal Communications Commission (FCC) at (202) 418-1440 or visit www.fcc.gov.)
- 4) Items where a disclaimer cannot be conveniently printed or would be impractical such as bumper stickers, pins, buttons, pens, wearing apparel, water towers, skywriting, etc.
- 5) Committee checks and receipts only used for administrative purposes.
- 6) Certain communications (direct mailings of 100 or less, similar pieces of mail, or communications by the PAC of a corporation or labor union requesting contributions from stockholders or labor union members).
- Disclaimer requirements do not apply to candidates for precinct committeeman or state convention delegate.
- 8) Disclaimer requirements do not apply to local public questions. (IC 3-9-3-2.5(a)(2))

Some examples of political materials and literature requiring disclaimers are newspaper advertisements, billboards, signs, posters, **yard signs**, (whether homemade or commercially printed), portable billboards, brochures, leaflets, circulars, letterheads and direct mail pieces sent to more than 100 persons. Type size and color contrast requirements are established as minimum standards for disclaimers. A 12-point type font size satisfies the size requirement for these types of disclaimers. (IC 3-9-3-2.5(e)) The color contrast requirement is met if the disclaimer is printed in black text on a white background or the degree of color contrast between the background and the text of the disclaimer is not less than the color contrast between the background and the largest text used in the communication.

Yard Signs

A political subdivision may not enforce an ordinance or a regulation relating to the number or size of signs that have a surface area not greater than thirty-two (32) square feet during the period beginning sixty (60) days before an election and ending the beginning of the sixth day after the election. A political subdivision is not prohibited from enforcing an ordinance or regulation relating to the number or size of signs at any time if necessary to ensure public safety. (IC 36-1-3-11)

Political signs may NOT be posted or placed on any other person's property, including a highway right-of-way and on utility poles, **without the property owner's permission**. Placing political signs **with** the approval of the property owner may also be subject to local zoning regulations as well as neighborhood covenants and restrictions. Ask your local planning commission for more information or check the county recorder's office for neighborhood covenants or restrictions.

An unauthorized sign placed in a highway right-of-way is a public nuisance. If placed in a highway right-of-way, the sign may be removed, but ONLY by the authority having jurisdiction over the highway. (IC 9-21-4-6) Contact the appropriate office (the city or town street department, the county highway department or the state department of transportation) for assistance.

Removing signs without the authority to do so may be criminal conversion, a Class A misdemeanor. (IC 35-43-4-3) Consult your personal attorney if you need more information.

Mailings that Include an Absentee Ballot Application

A mailed communication of more than 100 pieces of substantially similar pieces of mail that includes an Indiana absentee ballot application is required to set forth, in a clear and conspicuous manner, the name and mailing address of the person who mailed the communication in at least 12-point type size that is clearly readable by the recipient of the mailing with a reasonable degree of color contrast between the background and the printed statement. A communication complies with the contrast requirement if the information is printed in black text on a white background or the degree of color contrast between the background and the text of the information is not less than the color contrast between the background and the largest text included in the mailing. The requirement to include the name and mailing address of the person who mailed the communication that includes an Indiana absentee ballot does not apply to direct mailings of one hundred (100) or less of substantially similar pieces of mail (IC 3-6-4.9; IC 3-11-4-5.2)

False Statements Regarding Status as Officeholder

A person who knowingly, or intentionally, authorizes, finances, sponsors, or participates in the preparation, distribution, or broadcast of paid political advertisements or campaign material that falsely represents that a candidate in any election holds or has held an elected office is subject to civil penalties.

This prohibition does not apply to either a communication relating to an election for federal office, or to a person whose sole act is, in the normal course of business, participating in the preparation, printing, distribution, or broadcast of the advertising or material that contains the false representation. (IC 3-9-3-5)

The Indiana Election Commission has adopted Advisory Opinion 2015-1, which states the Commission's view that this state law does not require advertising or campaign material to include words or phrases such as "elect", "vote", or "for", in campaign materials to comply with IC 3-9-3-5. Specifically, advertising or campaign material containing text such as "John Doe County Assessor", for example, does **not** require inserting these words or phrases so that the communication would read "Elect John Doe County Assessor" or "John Doe for County Assessor" for the communication to comply with IC 3-9-3-5.



SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT BY A CANDIDATE'S COMMITTEE

(\$1,000 CONTRIBUTIONS OR MORE)

State Form 48492 (R6 / 5-19) Indiana Election Division (IC 3-9-5-20.1; 3-9-5-22)

INSTRUCTIONS: Only candidates receiving a "large contribution" are required to file this report. Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

(CFA-11)

FILE NUMBER

4(0-27,-05 TOTAL PAGES IN ENTIRE CFA-11 REPORT

IS THIS AN AMENDMENT? ☐ Yes ☐] No		****				
		COMMITTEE					
1. Full Name of Candidate (Include any nickname.) JAMES LE ROY TRWIN	_	s is a new name.	2. Committee	•	2865		
3. Mailing Address (Address where all campaign fi		ndence is received					
13951 3. 1050 W			2,				
4. City	State	ZIP Code	•	5. Party Affil	iation or If Indep	endent Candidat	e
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6. Office Sought (Include district number, if any. No	ot required for e	exploratory commi	ttee.)	7. County of			
TOWNSHIP BUARD				La	PortE		
8. Reporting Period (mm/dd/yy):	.,,			-	•		
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For classification, enter INDV for individual; PAC for political	action committee:	CORP for corporation;	LAB for labor organ	nization; OTHER	R for all entries which	h are not one of the	
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Warning: Any information contained in this report management of the person who knowingly files a fraudulent report commits report as required by the Indiana Campaign Finance Legenalties. (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18)	s a Level 6 felon	v. (IC 3-14-1-13) A ı	person who fails t	o file a comple	ete or accurate		



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?	∐ Ye	es ☑ No <i>If</i> Ye	s, pleas	e enter the	file number in t	his box. —	46-22-106
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2. Last Name	F	irst Name		Middle Name	Nickr		3. Type of Committee (Check one)
gresham		michael	1	;	-		☑ Candidate's Principal Committee
Mailing Address (number and street, city				<u> </u>	<u> </u>	10.5	Exploratory Committee
	, state, and	1 ZIP CODE)		5. FA	X (Optional)		mail Address (Optional)
2422 Ohio Street)		chaelgresham4mcas@gmail.com
7. City	State		8. Cour	•	9. Telephon	,	10. Telephone (Evening)
michigan city	IN	46360	lapo			98-3292	()
1. Party Affiliation				12. Office	Sought (Include dist	rict number, if a	ny. Not required for an exploratory committee
☐ Democratic ☐ Libertarian ☐ Rep					an City Area So		
SECTION B. COMMITTEE	INFO	DRMATION: Fi	ll in all	applicable	boxes as ful	ly and acci	urately as possible.
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Michael Gresham For N							•
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2422 Ohio Street					()	mie	chaelgresham4mcas@gmail.con
7. City	State	ZIP Code	18. Cou	inty	19. Telepho		20. Committee Organization Date
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				•		,	28. Telephone (Evening)
michigan city	in	46360	lapo		11 /	98-3292	fety deposit boxes or maintains funds.)
SECTION C. APPOINTME 2. I, as Chairperson of the)-1-14)			ttech a copy of the contract.) ☐ Yes ☑ N
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Michael J Gresham			_	if this is a new t			
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2422 Ohio Street					()	mic	chaelgresham4mcas@gmail.com
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<u>-</u>	CE OF	APPOINTMEN					
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subject to civil penalties (IC 3-9-4-16, IC	3-9-4-17,	, and IC 3-9-4-18).				,	