



**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)

(CFA-1)

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

FILE NUMBER

1. 410-25-36

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

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

2. Last Name Watkins	First Name George	Middle Name Rueben	Nickname	3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee
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4. Mailing Address (number and street, city, state, and ZIP code) PO Box 754	6. FAX (Optional) ()	6. E-mail Address (Optional)
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7. City Westville	State IN	ZIP Code 46391	8. County LaPorte	9. Telephone (Day) 219,898-0415	10. Telephone (Evening) 219,898-0415
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11. Party Affiliation <input checked="" type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input type="checkbox"/> Republican <input type="checkbox"/> Other	12. Office Sought (Include district number, if any. Not required for an exploratory committee.) Town Council Member Ward 2
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SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

13. Full Name of Committee (Do not abbreviate.) George Watkins for Town Council	14. Mailing Address (number and street, city, state, and ZIP code) PO Box 754	<input type="checkbox"/> Check if this is a new address.	15. FAX (Optional) ()	16. E-mail Address (Optional)
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17. City Westville	State IN	ZIP Code 46391	18. County LaPorte	19. Telephone 219,898-0415	20. Committee Organization Date (mm/dd/yy) 07/08/2025
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21. Chairperson's Full Name George Watkins	<input checked="" type="checkbox"/> Designate Candidate as Chairperson.	<input type="checkbox"/> Check if this is a new chairperson.
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22. Mailing Address (number and street, city, state, and ZIP code)	<input type="checkbox"/> Check if this is a new address.	23. FAX (Optional) ()	24. E-mail Address (Optional)
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25. City	State	ZIP Code	26. County	27. Telephone (Day)	28. Telephone (Evening)
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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.) NA	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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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.	Person Appointed Treasurer	Signature of the Committee Chairperson
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33. Treasurer's Full Name George Watkins	<input checked="" type="checkbox"/> Designate candidate as treasurer.	<input type="checkbox"/> Check if this is a new treasurer.
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34. Mailing Address (number and street, city, state, and ZIP code)	<input type="checkbox"/> Check if this is a new address.	35. FAX (Optional) ()	36. E-mail Address (Optional)
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37. City	State	ZIP Code	38. County	39. Telephone (Day)	40. Telephone (Evening)
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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
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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 George Rueben Watkins	Signature of Chairperson George R. Watkins	Date (mm/dd/yy) 07/08/25
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43. Typed or Printed Name of Candidate George Rueben Watkins	Signature of Candidate George R. Watkins	Date (mm/dd/yy) 07/08/25
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Warning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Level 6 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).

FOR OFFICE USE ONLY





REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4506 (R15 / 6-25)
Indiana Election Division (IC 3-9-6-14)

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

46-25-310

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) Check if this is a new name.

George Watkins for Town Council

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(219) 898-0415

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

108 Ridge St. P.O. Box 754

5. City, State, ZIP Code

Westville IN 46391

6. Party Affiliation (if applicable)

Democratic

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (Include any nickname.)

8. Party Affiliation or If Independent Candidate

9. Office Sought (Include district number, if any. Not required for exploratory committee.)

10. County of Residence

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. Check one:

Pre-Primary Pre-Election Annual Nomination Other

Final / Disbands Committee (Lines 18, 19, and 20 must be '0') Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)

Check one:

Pre-Convention
 Post-Convention

12. Reporting Period (mm/dd/yy):

From: 1-1-25

Through: 12-31-25

COLUMN A
This Period

COLUMN B
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

0

14. Cash on hand and investments January 1, current year.

0

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (Use Schedule A.)

0

0

15b. Unitemized

0

0

15c. Add lines 15a and 15b in both columns.

SUBTOTAL

0

0

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.

TOTAL

0

0

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)

0

0

17b. Unitemized

0

0

17c. Add lines 17a and 17b in both columns.

SUBTOTAL

0

0

18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)

TOTAL

0

0

19. Debts OWED BY the committee (Use Schedule D.)

0

20. Debts OWED TO the committee (Use Schedule E.)

0

FOR OFFICE USE ONLY

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

If a Treasurer of a PAC, I have not knowingly or willfully received, solicited, or accepted, either directly or indirectly, contributions or expenditures from a foreign national that exceeds \$50,000 within the four (4) years immediately preceding the date of the contribution. Check box

Signature of Treasurer

Title

Date (mm/dd/yy)

Signature of Candidate (if applicable)

George Watkins

Date (mm/dd/yy)

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Level 6 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 3-9-4-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

