POLITICAL ACTION COMMITTEE
OR LEGISLATIVE CAUCUS COMMITTEE
STATEMENT OF ORGANIZATION
State Form 28251 (R12 / 6-25)
Indiana Election Division (IC 3-9-1-3 and IC 3-9-1-4)

(CFA-2)

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

FILE NUMBER 46-26-57

1. IS THIS AN AMENDMENT? ■ Yes ☐ No *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.	3. Acronym or Abbreviated Name *(if any)*
La Porte County Young Democrats	LPC Young Dems
4. Mailing Address *(Address where all campaign finance correspondence is received.)* ☐ Check if this is a new address.	**5. E-mail Address** *(Optional)*
PO Box 87754	lpcyoungdems@gmail.com

6. City	State	ZIP Code	7. FAX *(Optional)*	8. Telephone	9. Committee Organization Date *(mm/dd/yy)*
Michigan City	IN	46361	( )	(219) 393-0893	

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

11. Is this committee a "Legislative Caucus Committee" under IC 3-5-2-27.3? ☐ Yes ■ No

12. State the purpose of the committee and on which issues the committee expects to focus.
Networking for young Democrats

13. Name and address of any connected, affiliated, sponsoring organization, corporation, group, or individual.
Indiana Young Democrats

14. Is this committee supporting a political party's entire ticket? ■ Yes ☐ No
Check party affiliation if applicable: ■ Democratic ☐ Libertarian ☐ Republican ☐ Other _____

15. If supporting or opposing a public question, state both the subject of the question AND the committee position.

16. Chairperson's Name ☐ Check if this is a new chairperson.	17. E-mail Address *(Optional)*
Gregory Coulter	cltr.cmpgn@gmail.com
18. Mailing Address *(number and street, city, state, and ZIP code)* ☐ Check if this is a new address.	**19. Telephone** *(Day)* / **20. Telephone** *(Evening)*
102 1/2 Georgia Ave Michigan City IN 46360	(219) 393-0893 / ( )
21. Treasurer's Name ■ Check if this is a new treasurer.	**22. E-mail Address** *(Optional)*
Ava Sinclair	
23. Mailing Address *(number and street, city, state, and ZIP code)* ☐ Check if this is a new address.	**24. Telephone** *(Day)* / **25. Telephone** *(Evening)*
402 Truesdell Ave, La Porte, IN 46350	(219) 851-44113 / ( )
26. Custodian of Records' Name ☐ Check if this is a new custodian.	**27. E-mail Address** *(Optional)*
28. Mailing Address *(number and street, city, state, and ZIP code)* ☐ Check if this is a new address.	**29. Telephone** *(Day)* / **30. Telephone** *(Evening)*
	( ) / ( )

31. 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.)*
Horizon Bank

32. Prohibited Source Affirmation *(please check box)* ☑ **I, as Treasurer of the foregoing committee, certify that no preliminary activity was funded by a prohibited source before the committee submitted this form.**

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

33. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee.	Person Appointed Treasurer	Signature of the Committee Chairperson
	Gregory Coulter	

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

34. 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.

35. Typed or Printed Name of Treasurer	Signature of Treasurer	Date *(mm/dd/yy)*
Ava Sinclair	Ava Sinclair	4/16/2026

SECTION D. CERTIFICATION OF STATEMENT

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.

36. Typed or Printed Name of Chairperson	Signature of Chairperson	Date *(mm/dd/yy)*
Gregory Coulter	Gregory Coulter	4/16/2026

Warning: Any information contained in this statement may not be copied for sale or used for any commercial purpose. *(IC 3-9-4-5)* State law requires that any change in this information must 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 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

11:04am TVS

LaPorte County Received APR 17 2026 Election Board

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R18 / 6-25)
Indiana Election Division (IC 3-9-5-14)

(CFA-4) Summary Sheet

FILE NUMBER: 46-26-57

TOTAL PAGES IN ENTIRE CFA-4 REPORT:

*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

COMMITTEE INFORMATION

1. Full Name of Committee (as on *Statement of Organization*) ☐ Check if this is a new name.
LaPorte County Young Democrats

2. Acronym or Abbreviated Name *(if any)*
LPC Young Dems

3. Committee Telephone Number
(219) 393-0893

4. Mailing Address *(Address where all campaign finance correspondence is received.)* ☐ Check if this is a new address.
PO Box 88754

5. City, State, ZIP Code
Michigan City, IN 46361

6. Party Affiliation *(if applicable)*
Democratic

CANDIDATE INFORMATION *(For Candidate's Committees Only)*

7. Full Name of Candidate *(Include any nickname.)*
Gregory Coulter

8. Party Affiliation or If Independent Candidate
D

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

10. County of Residence
LaPorte

TYPE OF REPORT

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.)*

CONVENTION CANDIDATES ONLY
Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting Period *(mm/dd/yy)*:
From: 01/01/2026 Through: 4/10/2026

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	1326.75	
14. Cash on hand and investments January 1, current year.		1326.75
CONTRIBUTIONS AND RECEIPTS		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		
15a. Itemized *(Use Schedule A.)*	0.00	0.00
15b. Unitemized	57.63	57.63
15c. Add lines 15a and 15b in both columns. SUBTOTAL	57.63	57.63
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL	0.00	0.00
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(Use Schedule B.) (Public Question: use Schedule C.)*	0.00	0.00
17b. Unitemized	0.00	0.00
17c. Add lines 17a and 17b in both columns. SUBTOTAL	0.00	0.00
18. Cash on hand and investments at close of this reporting period *(Subtract 17c from 16 in both columns.)* TOTAL	1374.78	1374.78
19. Debts OWED BY the committee *(Use Schedule D.)*	0.00	
20. Debts OWED TO the committee *(Use Schedule E.)*	0.00	

CERTIFICATION

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. ☐ *(please check box)*

Signature of Treasurer	Title	Date *(mm/dd/yy)*
		4/16/2026
Signature of Candidate *(if applicable)*		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 3-14-1-14)* and may be subject to civil penalties. *(IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)*

FOR OFFICE USE ONLY

LaPorte County
Received
APR 17 2026
Election Board

TS
11:04am

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R18 / 6-25)
Indiana Election Division (IC 3-9-5-14)

(CFA-4) Summary Sheet

FILE NUMBER: 46-26-57

TOTAL PAGES IN ENTIRE CFA-4 REPORT:

*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

COMMITTEE INFORMATION

1. Full Name of Committee (as on *Statement of Organization*) ☐ Check if this is a new name.
LaPorte County Young Democrats

2. Acronym or Abbreviated Name *(if any)*
LPC Young Dems

3. Committee Telephone Number
(219) 393-0893

4. Mailing Address *(Address where all campaign finance correspondence is received.)* ☐ Check if this is a new address.
PO Box 8754

5. City, State, ZIP Code
Michigan City, IN 46361

6. Party Affiliation *(if applicable)*
Democratic

CANDIDATE INFORMATION *(For Candidate's Committees Only)*

7. Full Name of Candidate *(Include any nickname.)*
Gregory Coulter

8. Party Affiliation or If Independent Candidate
Democratic

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

10. County of Residence
LaPorte

TYPE OF REPORT

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.)*

CONVENTION CANDIDATES ONLY
Check one:
☐ Pre-Convention ☐ Post-Convention

12. Reporting Period *(mm/dd/yy)*:
From: 4/10/26 Through: 10/9/26

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	1374.78	
14. Cash on hand and investments January 1, current year.		1326.75
CONTRIBUTIONS AND RECEIPTS		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		
15a. Itemized *(Use Schedule A.)*	0.00	0.00
15b. Unitemized	150.62	198.05
15c. Add lines 15a and 15b in both columns. SUBTOTAL	150.62	198.05
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL	1524.80	1524.80
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(Use Schedule B.) (Public Question: use Schedule C.)*	494.94	494.94
17b. Unitemized	137.54	137.54
17c. Add lines 17a and 17b in both columns. SUBTOTAL	632.48	632.48
18. Cash on hand and investments at close of this reporting period *(Subtract 17c from 16 in both columns.)* TOTAL	892.32	892.32
19. Debts OWED BY the committee *(Use Schedule D.)*	0.00	
20. Debts OWED TO the committee *(Use Schedule E.)*	0.00	

CERTIFICATION

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. ■ *(please check box)*

Signature of Treasurer	Title	Date *(mm/dd/yy)*
	Treasurer	10/16/2026
Signature of Candidate *(if applicable)*		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 3-14-1-14)* and may be subject to civil penalties. *(IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)*

FOR OFFICE USE ONLY

TVS

LaPorte County Received OCT 16 2026 Election Board

7:29 am

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R18 / 6-25)
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 _____

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 A 4imprint 2875 Atlas Avenue, Oshkosh, WI 54904		■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Pride mints	494.49	494.49	06/11/2026
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:			
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:			
		SUBTOTAL THIS PAGE OF SCHEDULE B	$494.49		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet.)*	$494.49		

LaPorte County
Received
OCT 16 2026
Election Board