



**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)

JAN 23 3:29 PM

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

**FILE NUMBER**

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 Allen	First Name Joseph	Middle Name Jeffrey	Nickname	3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee	
4. Mailing Address (number and street, city, state, and ZIP code) 3003 Orchard Road, Evansville, IN, 47720			5. FAX (Optional) ( )	6. E-mail Address (Optional) josephallen0617@gmail.com	
7. City Evansville	State IN	ZIP Code 47720	8. County Vanderburgh	9. Telephone (Day) (812) 461-8219	10. Telephone (Evening) (812) 461-8219
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.) German Township Advisory Board		

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

13. Full Name of Committee (Do not abbreviate.) <input type="checkbox"/> Check if this is a new name. Friends of Joe Allen					
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 3003 Orchard Road, Evansville, IN, 47720			15. FAX (Optional) ( )	16. E-mail Address (Optional) josephallen0617@gmail.com	
17. City Evansville	State IN	ZIP Code 47720	18. County Vanderburgh	19. Telephone (812) 461-8219	20. Committee Organization Date (mm/dd/yy) 01/23/2026
21. Chairperson's Full Name <input type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Joseph Jeffrey Allen					
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 3003 Orchard Road, Evansville, IN, 47720			23. FAX (Optional) ( )	24. E-mail Address (Optional) josephallen0617@gmail.com	
25. City Evansville	State IN	ZIP Code 47720	26. County Vanderburgh	27. Telephone (Day) (812) 461-8219	28. Telephone (Evening) (812) 461-8219
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.) Liberty Federal Credit Union					
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		

**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 Joseph Jeffrey Allen	Signature of the Committee Chairperson
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. Joseph Jeffrey Allen		
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 3003 Orchard Road, Evansville, IN, 47720		35. FAX (Optional) ( )
36. E-mail Address (Optional) josephallen0617@gmail.com		
37. City Evansville	State IN	ZIP Code 47720
38. County Vanderburgh	39. Telephone (Day) (812) 461-8219	40. Telephone (Evening) ( )

**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 Joseph Jeffrey Allen	Signature of Chairperson	Date (mm/dd/yy) 01/23/2026
43. Typed or Printed Name of Candidate Joseph Jeffrey Allen	Signature of Candidate	Date (mm/dd/yy) 01/23/2026

**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 6D 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**

VANDERBURGH CIRCUIT COURT

★ FILED ★

JAN 23 2026

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