



**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)

01/23/2026 12:53:56 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 <i>Unfried</i>	First Name <i>Gregory</i>	Middle Name <i>J</i>	Nickname <i>Greg</i>	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) <i>15138 Cemetery Rd</i>	5. FAX (Optional) ()	6. E-mail Address (Optional) <i>gufried45@gmail.com</i>
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7. City <i>Evansville</i>	State <i>IN</i>	ZIP Code <i>47725</i>	8. County <i>Vanderburgh</i>	9. Telephone (Day) <i>(812) 568-7940</i>	10. Telephone (Evening) <i>(812) 568-7940</i>
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11. Party Affiliation
 Democratic Libertarian Republican Other

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

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

13. Full Name of Committee (Do not abbreviate.) Check if this is a new name.

Friends of Unfried

14. Mailing Address (number and street, city, state, and ZIP code) <i>15138 Cemetery Rd</i>	<input type="checkbox"/> Check if this is a new address. ()	15. FAX (Optional) ()	16. E-mail Address (Optional) <i>gufried45@gmail.com</i>
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17. City <i>Evansville</i>	State <i>IN</i>	ZIP Code <i>47725</i>	18. County <i>Vanderburgh</i>	19. Telephone <i>(812) 568-7940</i>	20. Committee Organization Date <i>(mm/dd/yy) 01/23/2026</i>
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21. Chairperson's Full Name Designate Candidate as Chairperson. Check if this is a new chairperson.

Greg Unfried

22. Mailing Address (number and street, city, state, and ZIP code) <i>15138 Cemetery Rd</i>	<input type="checkbox"/> Check if this is a new address. ()	23. FAX (Optional) ()	24. E-mail Address (Optional) <i>gufried45@gmail.com</i>
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25. City <i>Evansville</i>	State <i>IN</i>	ZIP Code <i>47725</i>	26. County <i>Vanderburgh</i>	27. Telephone (Day) <i>(812) 568-7940</i>	28. Telephone (Evening) <i>(812) 568-7940</i>
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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.)
Evansville Teachers FC Liberty Federal Credit Union

30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.) <i>not applicable</i>	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. <input checked="" type="checkbox"/> Designate candidate as treasurer.	Person Appointed Treasurer <i>Greg Unfried</i>	Signature of the Committee Chairperson <i>[Signature]</i>
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33. Treasurer's Full Name Designate candidate as treasurer. Check if this is a new treasurer.

Gregory J Unfried

34. Mailing Address (number and street, city, state, and ZIP code) <i>15138 Cemetery Rd</i>	<input type="checkbox"/> Check if this is a new address. ()	35. FAX (Optional) ()	36. E-mail Address (Optional) <i>gufried45@gmail.com</i>
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37. City <i>Evansville</i>	State <i>IN</i>	ZIP Code <i>47725</i>	38. County <i>Vanderburgh</i>	39. Telephone (Day) <i>(812) 568-7940</i>	40. Telephone (Evening) <i>(812) 568-7940</i>
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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 <i>[Signature]</i>
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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 <i>Greg Unfried</i>	Signature of Chairperson <i>[Signature]</i>	Date (mm/dd/yy) <i>01/23/2026</i>
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43. Typed or Printed Name of Candidate <i>Greg Unfried</i>	Signature of Candidate <i>[Signature]</i>	Date (mm/dd/yy) <i>01/23/2026</i>
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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

VANDERBURGH CIRCUIT COURT

FILED

JAN 23 2026

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