



**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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If Yes, please enter the file number in this box. →</i>									
SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.									
2. Last Name Zoph		First Name Jennifer		Middle Name Lynn		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) 1013 W. Heerdink Ave.				5. FAX (Optional) ()		6. E-mail Address (Optional) jlzoph@yahoo.com			
7. City Evansville		State IN	ZIP Code 47710	8. County Vanderburgh		9. Telephone (Day) (812) 205-5461		10. Telephone (Evening) ()	
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.) Center 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 checked="" type="checkbox"/> Check if this is a new name. <i>Friends of Jennifer Zoph</i>									
14. Mailing Address (number and street, city, state, and ZIP code) <input checked="" type="checkbox"/> Check if this is a new address. 1013 W. Heerdink Ave				15. FAX (Optional) ()		16. E-mail Address (Optional) jlzoph@yahoo.com			
17. City Evansville		State IN	ZIP Code 47710	18. County Vanderburgh		19. Telephone (Day) (812) 205-5461		20. Committee Organization Date (mm/dd/yy) 02/03/2026	
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Jennifer Zoph									
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 1013 W. Heerdink Ave. Evansville, IN 47710				23. FAX (Optional) ()		24. E-mail Address (Optional) jlzoph@yahoo.com			
25. City Evansville		State IN	ZIP Code 47710	26. County Vanderburgh		27. Telephone (Day) (812) 205-5461		28. Telephone (Evening) (812) 205-5461	
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 Jennifer Zoph			Signature of the Committee Chairperson <i>Jennifer Zoph</i>		
33. Treasurer's Full Name <input checked="" type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. Jennifer Zoph									
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 1013 W. Heerdink Ave Evansville, IN 47710				35. FAX (Optional) ()		36. E-mail Address (Optional) jlzoph@yahoo.com			
37. City Evansville		State IN	ZIP Code 47710	38. County Vanderburgh		39. Telephone (Day) (812) 205-5461		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			
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 Jennifer Zoph			Signature of Chairperson <i>Jennifer Zoph</i>				Date (mm/dd/yy) 02/03/2026		
43. Typed or Printed Name of Candidate Jennifer Zoph			Signature of Candidate <i>Jennifer Zoph</i>				Date (mm/dd/yy) 02/03/2026		
Warning: State law requires that any change in this information be reported <u>within ten (10) days</u> 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).									

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