



CANDIDATE'S STATEMENT OF ORGANIZATION AND
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

State Form 4604 (R14 / 10-17)

Indiana Election Division (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

(CFA-1)

FEB 6 10:21AM

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 Shetler | First Name Thomas | Middle Name James | Nickname Tommy | 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) 10837 Haverwood Meadows | | | | 5. FAX (Optional) () | 6. E-mail Address (Optional) |
| 7. City Evansville | State IN | ZIP Code 47725 | 8. County Vanderburgh | 9. Telephone (Day) 812 319 5057 | 10. Telephone (Evening) 812 319 5150 |
| 11. Party Affiliation <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Other | | | 12. Office Sought (Include district number, if any. Not required for an exploratory committee.) Central Township trustee 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. Committee to elect Thomas J. Shetler | | | | | |
| 14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 1253 Emerald Ave | | | | 15. FAX (Optional) () | 16. E-mail Address (Optional) ThomasJShetleriii@gmail.com |
| 17. City Evansville | State IN | ZIP Code 47711 | 18. County Vanderburgh | 19. Telephone 812 319 5057 | 20. Committee Organization Date (mm/dd/yy) 2-6-26 |
| 21. Chairperson's Full Name <input type="checkbox"/> Designate Candidate as Chairperson. <input checked="" type="checkbox"/> Check if this is a new chairperson. Thomas J. Shetler III | | | | | |
| 22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 10837 Haverwood Meadows | | | | 23. FAX (Optional) () | 24. E-mail Address (Optional) |
| 25. City Evansville | State IN | ZIP Code 47725 | 26. County Vanderburgh | 27. Telephone (Day) 812 319 5057 | 28. Telephone (Evening) 812 319 5050 |
| 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.) None | | | | | |
| 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)

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|--|--------------------|--------------------------|--|--|--|
| 32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee. Thomas Shetler III | | | Signature of the Committee Chairperson Thomas J. Shetler III | | |
| 33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input checked="" type="checkbox"/> Check if this is a new treasurer. Thomas Shetler Thomas James Shetler Jr. | | | | | |
| 34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 4713 W. Cavel Rd | | | | 35. FAX (Optional) () | 36. E-mail Address (Optional) |
| 37. City Evansville | State IN | ZIP Code 47711 | 38. County Vanderburgh | 39. Telephone (Day) 812 319 5050 | 40. Telephone (Evening) 812 455 4245 |

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

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| 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 Tom Shetler |
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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 Thomas Shetler | Signature of Chairperson Thomas Shetler | Date (mm/dd/yy) 2-6-26 |
| 43. Typed or Printed Name of Candidate Thomas Shetler | Signature of Candidate Thomas Shetler | Date (mm/dd/yy) 2-6-26 |

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

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FEB 06 2026

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