



**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)

1:49PM
AUG 13 2019

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 Seib | | First Name Patrick | | Middle Name Rodger | Nickname N/A | 3. Type of Committee (Check one) <input type="checkbox"/> Candidate's Principal Committee <input checked="" type="checkbox"/> Exploratory Committee |
| 4. Mailing Address (number and street, city, state, and ZIP code) 14848 Old State Court | | | | 5. FAX (Optional) () | | 6. E-mail Address (Optional) |
| 7. City Evansville | State IN | ZIP Code 47725 | 8. County Vanderburgh | 9. Telephone (Day) 812, 454-5578 | 10. Telephone (Evening) 812, 454-5578 | |
| 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.) N/A | | |

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 Patrick Seib | | | | | | |
| 14. Mailing Address (number and street, city, state, and ZIP code) <input checked="" type="checkbox"/> Check if this is a new address. 14848 Old State Court | | | | 15. FAX (Optional) () | | 16. E-mail Address (Optional) pseib@edgetekinc.com |
| 17. City Evansville | State IN | ZIP Code 47725 | 18. County Vanderburgh | 19. Telephone 812, 454-5578 | 20. Committee Organization Date (mm/dd/yy) 11/01/17 | |
| 21. Chairperson's Full Name <input type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Ashley Ann Seib | | | | | | |
| 22. Mailing Address (number and street, city, state, and ZIP code) <input checked="" type="checkbox"/> Check if this is a new address. 14848 Old State Court | | | | 23. FAX (Optional) () | | 24. E-mail Address (Optional) see above |
| 25. City Evansville | State IN | ZIP Code 47725 | 26. County Vanderburgh | 27. Telephone (Day) 812, 618-7469 | 28. Telephone (Evening) 812, 618-7469 | |
| 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.) Elberfeld State Bank | | | | | | |
| 30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.) To receive and expend funds to explore the opportunities for elected office. | | | | 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. Patrick Seib | | | Signature of the Committee Chairperson | | | |
| 33. Treasurer's Full Name <input checked="" type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. Patrick Rodger Seib | | | | | | |
| 34. Mailing Address (number and street, city, state, and ZIP code) <input checked="" type="checkbox"/> Check if this is a new address. 14848 Old State Court | | | | 35. FAX (Optional) () | | 36. E-mail Address (Optional) see above |
| 37. City Evansville | State IN | ZIP Code 47725 | 38. County Vanderburgh | 39. Telephone (Day) 812, 454-5578 | 40. Telephone (Evening) 812, 454-5578 | |

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 Ashley Ann Seib | Signature of Chairperson | Date (mm/dd/yy) 08/09/19 |
| 43. Typed or Printed Name of Candidate Patrick Rodger Seib | Signature of Candidate | Date (mm/dd/yy) 08/09/19 |

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

★ FILED ★

AUG 13 2019

CLERK