



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)

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Reset Form

(CFA-1)

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 RASCHER		First Name NATALIE		Middle Name JUSTINE-MARIE	Nickname	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) 236 E BUENA VISTA RD				5. FAX (Optional)		6. E-mail Address (Optional)	
7. City EVANSVILLE	State IN	ZIP Code 47711	8. County VANDERBURGH	9. Telephone (Day) (812) 480-2145		10. Telephone (Evening) (812) 480-2145	
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.) POSSIBLE NEW POSITION			

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 NATALIE RASCHER							
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 236 E BUENA VISTA RD				15. FAX (Optional)		16. E-mail Address (Optional)	
17. City EVANSVILLE	State IN	ZIP Code 47711	18. County VANDERBURGH	19. Telephone (812) 480-2145		20. Committee Organization Date (mm/dd/yy) 11/14/22	
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. NATALIE JUSTINE-MARIE RASCHER							
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 236 E BUENA VISTA RD				23. FAX (Optional)		24. E-mail Address (Optional)	
25. City EVANSVILLE	State IN	ZIP Code 47711	26. County VANDERBURGH	27. Telephone (Day) (812) 480-2145		28. Telephone (Evening) (812) 480-2145	
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.) TO SEEK POSSIBLE NEW POSITION				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 NATALIE RASCHER	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. NATALIE JUSTINE-MARIE RASCHER			
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 236 E BUENA VISTA RD		35. FAX (Optional)	
36. E-mail Address (Optional)		37. City EVANSVILLE	
State IN	ZIP Code 47711	38. County VANDERBURGH	39. Telephone (Day) (812) 480-2145
40. Telephone (Evening) (812) 480-2145			

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.			FOR OFFICE USE ONLY VANDERBURGH ELECTION OFFICE FILED NOV 14 2022 CLERK KG
42. Typed or Printed Name of Chairperson NATALIE RASCHER	Signature of Chairperson 	Date (mm/dd/yy) 11/14/22	
43. Typed or Printed Name of Candidate NATALIE RASCHER	Signature of Candidate 	Date (mm/dd/yy) 11/14/22	
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 3-9-4-15, IC 3-9-4-17, and IC 3-9-4-18).			