



**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)

9 12:22PM

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 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 Helmer		First Name caine		Middle Name Alexander		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) 123 Wedeking ave				5. FAX (Optional)		6. E-mail Address (Optional) caine for mayor@gmail.com			
7. City Evansville		State IN		ZIP Code 47711		8. County Vanderburgh		9. Telephone (Day) 812 802 3810	
								10. Telephone (Evening) 812 802-3810	
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.) Mayor					
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. Committee to elect Caine Helmer									
14. Mailing Address (number and street, city, state, and ZIP code) 123 Wedeking ave				15. FAX (Optional)		16. E-mail Address (Optional) caine for mayor@gmail.com			
17. City Evansville		State IN		ZIP Code 47711		18. County Vanderburgh		19. Telephone 812 802 3810	
								20. Committee Organization Date (mm/dd/yy) 01/09/2023	
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Caine Helmer				22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 123 Wedeking ave					
23. City Evansville		State IN		ZIP Code 47711		24. County Vanderburgh		25. Telephone (Day) 812 802 3810	
								26. Telephone (Evening) 812 802 3810	
27. 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.) Heritage 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 caine Helmer		Signature of the Committee Chairperson caine Helmer			
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. caine Alexander Helmer									
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 123 Wedeking ave				35. FAX (Optional)		36. E-mail Address (Optional) caine for mayor@gmail.com			
37. City Evansville		State IN		ZIP Code 47711		38. County Vanderburgh		39. Telephone (Day) 812 802 3810	
								40. Telephone (Evening) 812 802 3810	
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 caine Helmer					
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 caine Helmer		Signature of Chairperson caine Helmer				Date (mm/dd/yy) 01/09/23			
43. Typed or Printed Name of Candidate caine Helmer		Signature of Candidate caine Helmer				Date (mm/dd/yy) 01/09/23			
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 ELECTION OFFICE FILED JAN 09 2023 8/4/23 LG CLERK									