



**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)

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 Mosby Jr.	First Name Keith	Middle Name Allen	Nickname	3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee
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4. Mailing Address (number and street, city, state, and ZIP code) 1308 Felstead Rd. Evansville Indiana, 47712	5. FAX (Optional) ()	6. E-mail Address (Optional) keithmosby37@yahoo.com
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7. City Evansville	State IN	ZIP Code 47712	8. County Vanderburgh	9. Telephone (Day) (812) 589-5895	10. Telephone (Evening) (812) 589-5895
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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.) Vanderburgh County Coroner
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SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

13. Full Name of Committee (Do not abbreviate.) Check if this is a new name.

Committee to elect Keith Mosby Jr.

14. Mailing Address (number and street, city, state, and ZIP code) 2904 S. Weinbach Ave. Evansville IN 47714	<input checked="" type="checkbox"/> Check if this is a new address.	15. FAX (Optional) ()	16. E-mail Address (Optional)
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17. City Evansville	State IN	ZIP Code 47714	18. County Vanderburgh	19. Telephone (812) 453-6479	20. Committee Organization Date (mm/dd/yy) 01-25-2024
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21. Chairperson's Full Name David Wayne Mosby	<input type="checkbox"/> Designate Candidate as Chairperson.	<input checked="" type="checkbox"/> Check if this is a new chairperson.
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22. Mailing Address (number and street, city, state, and ZIP code) 5411 Bridgeview Dr. Evansville Indiana 47712	<input checked="" type="checkbox"/> Check if this is a new address.	23. FAX (Optional) ()	24. E-mail Address (Optional)
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25. City Evansville	State IN	ZIP Code 47712	26. County Vanderburgh	27. Telephone (Day) (812) 453-6479	28. Telephone (Evening) (812) 453-5215
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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.)
Old National Bank

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
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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 Melissa Mosby	Signature of the Committee Chairperson <i>David Wayne Mosby</i>
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33. Treasurer's Full Name Melissa Michelle Mosby	<input type="checkbox"/> Designate candidate as treasurer.	<input checked="" type="checkbox"/> Check if this is a new treasurer.
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34. Mailing Address (number and street, city, state, and ZIP code) 2904 S. Weinbach Ave. Evansville In 47714	<input checked="" type="checkbox"/> Check if this is a new address.	35. FAX (Optional) ()	36. E-mail Address (Optional) missymosby@fcte.com
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37. City Evanville	State IN	ZIP Code 47714	38. County Vanderburgh	39. Telephone (Day) (812) 453-6479	40. Telephone (Evening) (812) 453-6479
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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 <i>David Wayne Mosby</i>
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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 David Wayne Mosby	Signature of Chairperson <i>David Wayne Mosby</i>	Date (mm/dd/yy) 1-25-2024
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43. Typed or Printed Name of Candidate Keith Allen Mosby Jr.	Signature of Candidate <i>Keith Allen Mosby Jr.</i>	Date (mm/dd/yy) 1-25-2024
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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 25 2024

STH
CLERK