



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

(CFA - 1)

State Form 4604 (R12/9-09) Indiana Election Commission (IC 3-9-1-3, IC 3-9-1-4, IC 3-9-1-5)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK SEE INSTRUCTIONS ON REVERSE SIDE.

FILE NUMBER

7378

1. IS THIS AN AMENDMENT? [X] NO [ ] YES - 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: Bailey, First Name: Alyssa, Middle Name: Ann, Nickname: [ ], 3. Type of Committee: [X] Candidate's Principal Committee, [ ] Exploratory Committee, 4. Mailing Address: PO Box 112, 5. FAX (Optional): [ ], 6. E-mail (Optional): electalysabailey@gmail.com, 7. City: Crane, State: IN, Zip Code: 47522, 8. County: Greene, 9. Telephone (Day): 812-512-1139, 10. Telephone (Evening): [ ], 11. Party Affiliation: Democratic, 12. Office Sought: State Representative, District 62

SECTION B COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

13. Fill name of committee: Committee to Elect Alyssa Bailey, [X] Check if this is a new name, 14. Mailing Address: PO Box 112, [X] Check if this is a new address, 15. FAX (Optional): [ ], 16. E-mail Address (Optional): [ ], 17. City: Crane, State: IN, Zip Code: 47522, 18. County: Greene, 19. Telephone: [ ], 20. Committee Organization Date: 02/05/2020, 21. Chairperson's Full Name: Alyssa Ann Bailey, [ ] Designate Candidate as Chairperson, [ ] Check if this is a new chairperson, 22. Mailing Address: PO Box 112, [ ] Check if this is a new address, 23. FAX (Optional): [ ], 24. E-mail Address (Optional): [ ], 25. City: Crane, State: IN, Zip Code: 47522, 26. County: Greene, 27. Telephone (Day): [ ], 28. Telephone (Evening): [ ], 29. Bank or Other Depositories: Crane Federal Union, 30. Exploratory Committee: [ ], 31. Salaries and Reimbursements: [ ] No [ ] Yes

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: Alyssa Bailey, Signature of the Committee Chairperson: [ ], 33. Treasurer's Full Name: Alyssa Ann Bailey, [X] Designate Candidate as Treasurer, [ ] Check if this is a new Treasurer, 34. Mailing Address: PO Box 112, [ ] Check if this is a new address, 35. FAX (Optional): [ ], 36. E-mail Address (Optional): electalysabailey@gmail.com, 37. City: Crane, State: IN, Zip Code: 47522, 38. County: Greene, 39. Telephone (Day): 812-512-1139, 40. Telephone (Evening): [ ]

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 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: [ ], Signature of Chairperson: [ ], Date (MM-DD-YY): [ ], 43. Typed or printed name of Candidate: Alyssa Ann Bailey, Signature of Candidate: [ ], Date (MM-DD-YY): [ ]

FOR OFFICE USE ONLY

Confirm Nbr: 14705

Filed: 2/5/2020 3:48:00PM

Warning: State law requires that any change in this information be reported within 10 days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Level 6 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, 3-9-4-17, and 3-9-4-18).