



**REGULAR PARTY COMMITTEE
STATEMENT OF ORGANIZATION**

State Form 46413 (R6 / 10-17)
Indiana Election Division (IC 3-9-1-3 and IC 3-9-1-4)

(CFA-3)

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

2. Full Name of Committee (Do not abbreviate.) Check if this is a new name. **Annette Bourff Milam for Howard County Clerk** 3. Acronym or Abbreviated Name (if any)

4. Mailing Address (Address where all campaign finance correspondence is received.) Check if this is a new address. **1634 W Carter St** 5. E-mail Address (Optional) **jamilam581@gmail.com**

6. City **Kokomo** State **IN** ZIP Code **46901** 7. FAX (Optional) 8. Telephone **(765) 860-4909** 9. Committee Organization Date (mm/dd/yy) **04/19/22**

10. Is this committee registered with the Federal Election Commission? Yes No

11. Type of Regular Party Committee (Check one)
 National State Congressional District County City Town

12. Party Affiliation (Check one)
 Democratic Libertarian Republican Other

13. Chairperson's Name Check if this is a new chairperson. **Annette Bourff Milam** 14. E-mail Address (Optional) **Same as above**

15. Mailing Address (number and street, city, state, and ZIP code) Check if this is a new address. **Same as above** 16. Telephone (Day) **(765) 860-4909** 17. Telephone (Evening) **Same**

18. Treasurer's Name Check if this is a new treasurer. **Matthew Sedam** 19. E-mail Address (Optional)

20. Mailing Address (number and street, city, state, and ZIP code) Check if this is a new address. **912 Wildwood Dr., Kokomo, IN 46901** 21. Telephone (Day) **(765) 860-3728** 22. Telephone (Evening)

23. Custodian of Records' Name Check if this is a new custodian. 24. E-mail Address (Optional)

25. Mailing Address (number and street, city, state, and ZIP code) Check if this is a new address. 26. Telephone (Day) 27. Telephone (Evening)

28. 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.)

SECTION B. APPOINTMENT OF TREASURER (IC 3-9-1-14)

29. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee. **Person Appointed Treasurer: Matt Sedam** **Signature of the Committee Chairperson: Annette Bourff Milam**

SECTION C. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)

30. I give notice that I accept the duties and responsibilities of Treasurer of this Committee. I am not the chairperson of any other campaign finance committee. **FOR OFFICE USE ONLY**

31. Typed or Printed Name of Treasurer **Matthew Sedam** Signature of Treasurer **[Signature]** Date (mm/dd/yy) **4/19/22**

SECTION D. CERTIFICATION OF STATEMENT

I certify that I am the duly appointed Chairperson of the Committee and have examined this statement. To the best of my knowledge and belief it is true, correct and complete.

32. Typed or Printed Name of Chairperson **Annette Bourff Milam** Signature of Chairperson **Annette Bourff Milam** Date (mm/dd/yy) **4/19/22**

Warning: Any information contained in this statement may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) State law requires that any change in this information must 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 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).

FILED

APR 19 2022

**DEBBIE STEWART
Clerk Howard Cir. Court**