



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

(CFA-1)

State Form 4604 (R15 / 5-19)
Indiana Election Division (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		
1. IS THIS AN AMENDMENT? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If Yes, please enter the file number in this box. →</i>												
SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.												
2. Last Name Stephenson			First Name Robert			Middle Name David			Nickname Bob		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) 132 Conradt Ave						5. FAX (Optional) ()			6. E-mail Address (Optional)			
7. City Kokomo		State IN	ZIP Code 46901		8. County Howard		9. Telephone (Day) (765) 461-8561		10. Telephone (Evening) ()			
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.) Kokomo Common Council, District 2						
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 to Elect Bob Stephenson												
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address.						15. FAX (Optional)			16. E-mail Address (Optional)			
17. City Kokomo		State In	ZIP Code 46901		18. County Howard		19. Telephone (765) 461-8561		20. Committee Organization Date (mm/dd/yy) 6/27/2023			
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Bob Stephenson												
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address.						23. FAX (Optional)			24. E-mail Address (Optional)			
25. City Kokomo		State In	ZIP Code 46901		26. County Howard		27. Telephone (Day) (765) 461-8561		28. Telephone (Evening) ()			
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.)												
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 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 Eli Guest			Signature of the Committee Chairperson <i>Eli Guest</i>			
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. Eli Jack Guest												
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address.						35. FAX (Optional)			36. E-mail Address (Optional)			
37. City Kokomo		State IN	ZIP Code 46902		38. County Howard		39. Telephone (Day) (765) 860-8107		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 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 Robert Stephenson			Signature of Chairperson <i>Robert Stephenson</i>					Date (mm/dd/yy) 6/26-2023				
43. Typed or Printed Name of Candidate Robert Stephenson			Signature of Candidate <i>Robert Stephenson</i>					Date (mm/dd/yy) 6/26/2023				
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

FILED

JUL 06 2023

DEBBIE STEWART
Clerk Howard Cir. Court

INSTRUCTIONS FOR COMPLETING THIS FORM

This is a dual purpose form. The most common use of this form is to designate a candidate's principal committee in which the candidate is both the chairperson and treasurer. The form enables the candidate to organize and at the same time designate the candidate's principal committee as required by IC 3-9-1-3, IC 3-9-1-4 & IC 3-9-1-5.

The form also allows a person exploring opportunities for seeking a political office but who has not definitely decided to be a candidate for a particular office to organize an exploratory committee. If the candidate is not yet a candidate for a specific office, check "exploratory committee" under Section A 3. When the candidate **does** become a candidate for a specific office, an amended CFA-1 must be filed.

The preparer should **type or print legibly in black ink** all information on this form. If more space is needed please attach additional sheets. All versions of State Form 4604 prior to revision (R10/10-01) are obsolete and cannot be used (IC 3-5-4-8). State law requires that any changes on this form must be reported **WITHIN TEN (10) DAYS OF THE CHANGE**.

ITEM 1. IS THIS AN AMENDMENT? Check the appropriate box. If "YES" is checked, enter the file number in the file number box and go on to Section A. If "NO" is checked, proceed directly to Section A.

SECTION A. CANDIDATE INFORMATION: Enter the name of the candidate, as set forth in the candidate's voter registration record and any nickname the candidate uses.

TYPE OF COMMITTEE. See second paragraph above. Be sure to enter the full and current address and the ZIP Code+4, if known. Under party affiliation, enter the party the candidate supports. If no party is supported, enter "Independent." A "Write-In" candidate should follow the same procedure; do not write "Write-In."

OFFICE BEING SOUGHT. Enter the full name of that office. For example, "Indiana State Senator, District ____." ***This box is not required to be completed by an exploratory committee.***

SECTION B. COMMITTEE INFORMATION: Do not use any abbreviations in the committee name. Check the new name box if this is a new name. Be sure to enter the full and current mailing address. All correspondence with the committee relative to filings under the Campaign Finance Act will be mailed to this address, unless specified otherwise.

Check the new address if appropriate. Enter the ZIP Code+4, if known, in all boxes calling for the ZIP Code. The date the committee was organized may be the date the candidate publicly announced, filed a declaration of candidacy, solicited or accepted contributions, or made an expenditure. (IC 3-5-2-6)

ITEM 16. COMMITTEES FILING WITH THE INDIANA ELECTION DIVISION ONLY: Committees that file campaign finance reports with the Indiana Election Division and wish to file these reports electronically may contact the Election Division at (800) 622-4941 or at the e-mail address campaignfinance@iec.in.gov for further information.

ITEM 21. Chairperson. This may be the candidate. However, the chairperson may not be the treasurer of any other campaign finance committee except in the case of the candidate's committee. Check if this is a new chairperson or new information.

ITEM 29. Bank or Other Depositories. If a candidate's committee accepts contributions or makes expenditures on an aggregate amount of more than two hundred dollars (\$200) in a year, all funds of a committee must be segregated from, and may not be commingled with, the personal funds of officers, members or associates of the committee. (IC 3-9-2-9)

ITEM 30. Exploratory Committee. Enter a brief statement explaining the purpose of this committee. Example: "To receive and expend funds to explore the opportunities for elected office."

ITEM 31. Salaries and Reimbursements. Pursuant to Indiana Election Commission Advisory Opinion 2001-01, attach a copy of any contract between the committee and the candidate permitting salary and reimbursement payments.

SECTION C. APPOINTMENT OF TREASURER:

ITEM 32. Treasurer. The treasurer must be a U.S. citizen and may not be the chairperson of any other campaign finance committee except in the case of a candidate's committee. The treasurer's duties and responsibilities are discussed in detail in the Instruction Manual for the Indiana Campaign Finance Act (*current edition*). Check if this is a new treasurer or new information. This section must be completed in its entirety by the committee chairperson.

SECTION D. ACCEPTANCE OF APPOINTMENT: The treasurer must provide the treasurer's written signature verifying acceptance of the duties and responsibilities as committee treasurer.

SECTION E. CERTIFICATION OF STATEMENT: The chairperson and candidate must enter their typed or printed names, written signatures and date signed in this section. **Note:** If the candidate and the chairperson are the same only one signature is necessary.

SPECIAL INSTRUCTIONS FOR STATEWIDE CANDIDATES AND STATE LEGISLATIVE CANDIDATES

This form must be filed **electronically** with the Election Division. Contact 1-800-622-4941 for more information. *If you are opening a committee for the first time, or amending your current CFA-1 due to a change in treasurer or chair, a signed copy of the CFA-1 (with original signatures) must also be emailed or faxed to the Election Division.*

WARNING: Any information contained in this statement may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) Using campaign funds for primarily personal purposes is prohibited. (IC 3-9-3-4 and IC 3-9-1-12)



CERTIFICATE OF CANDIDATE SELECTION TO FILL AN EARLY BALLOT VACANCY FOR A CITY OR TOWN OFFICE IN 2023 **FILED** (CAN-49)

State Form 49040 (R6 / 8-22)
Indiana Election Division (IC 3-13-1-15)

JUN 27 2023

INSTRUCTIONS: For use by major political parties in filling ballot vacancies for city or town office. This certificate must be filed with the circuit court clerk no later than three (3) days (excluding Saturdays and Sundays) after selection of the candidate. However, when a vacancy occurs because no candidate was nominated at the primary, the certificate must be filed not later than NOON, July 3, 2023. Except for city and town judge candidates, a CAN-12 statement of economic interests by the candidate selected to fill the early ballot vacancy for a city or town office must be filed WITH this form. A candidate for city and town judge must attach to this form a receipt showing the statement of economic interests form prescribed by the Commission on Judicial Qualifications was filed.

TO THE Howard COUNTY CIRCUIT COURT CLERK:

GENERAL INFORMATION

This is to certify the following:

(1) (Check appropriate box):

- (A) Since fewer than two (2) precinct committeemen were eligible to participate in a caucus or quorum was not established at the caucus, the county chairman directly appointed the candidate named below to fill the vacancy.
- (B) A duly called meeting of the (check one) Democratic Party OR the Republican Party Committee of Howard County, Indiana was held on the 13 day of June, 2023. The Chair of the Central Committee was authorized to certify the selection of the name of the candidate stated below;
- (C) If no meeting described in paragraph (B) was conducted, the County Committee has authorized the county chairman or the officers of the county committee to fill the ballot vacancy, and a copy of this authorization is attached.

- (2) The candidate named in this certificate is a duly qualified and registered voter of the above-named county (and the district or division the candidate seeks to represent), as the candidate for the office of Kokomo Common Council, District 2 (if any) to be voted on at the municipal election to be held on November 7, 2023, to fill a vacancy now existing on this Party ticket.
- (3) The candidate named in this certificate is legally qualified to be a candidate for and to hold the office.
- (4) This certificate is executed to request that this candidate's name be certified to the appropriate election officials so that it will appear on the municipal election ballot. The written consent of this person to the nomination has previously been filed with this office or is attached (CAN-48 form). A copy of the candidate's statement of economic interest form is filed with this Certificate.

CANDIDATE NAME AND RESIDENCY INFORMATION

(5) Name of Candidate (as the candidate wants the name to appear on the ballot and as permitted to appear on the ballot under IC 3-5-7):

Bob Stephenson

(Include any Nickname and/or Suffix, such as Jr., Sr., II, III, IV)

(6) Candidate's residence address is:

132 Conradt Ave. Kokomo IN 46901
Complete Residence Address Must Be Inserted *City* *ZIP Code*

(7) Candidate's mailing address is (if different from residence address):

Mailing Address (Write "SAME" if both addresses are identical or leave blank.) City IN ZIP Code

CERTIFICATION OF COUNTY PARTY CHAIR OR CHAIR OF CAUCUS

I, the Chair of the above-named County Central Committee acting to fill a ballot vacancy for a local office or the Chair of the Caucus, certify that the information in this Certificate of Candidate Selection is true and complete.

Lisa Washington Lisa Washington 6 / 22 / 2023
Signature of Chair Printed Name of Chair Date Signed (MM/DD/YY)

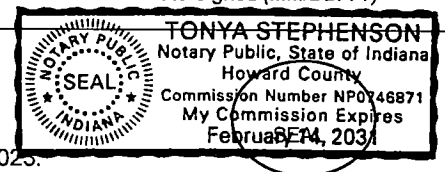
STATE OF Indiana

COUNTY OF Howard

Subscribed and sworn to before me this 22 day of June, 2023.

Notary Public
Notary Public or Other Official Administering Oath according to IC 33-42-9

My Commission expires (applies only to Notary Public): February 14, 2031 County of Residence: Howard



I, the undersigned, affirm that the information set forth on this Statement of Economic Interests is true and complete.

Signed, this the 22 day of June, 2023.

Robert D. Stephenson

Signature

Robert D. Stephenson

Printed Name

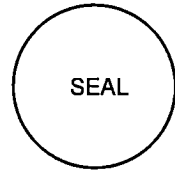
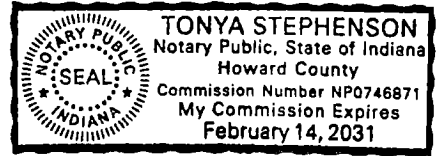
STATE OF Indiana
COUNTY OF Howard }

Subscribed and affirmed to before me this 22 day of June, 2023

Tonya Stephenson
Notary Public or Other Official Administering Oath

My Commission expires (applies only to Notary Public): February 14, 2031

County of Residence: Howard



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**DECLARATION OF CANDIDACY AND WRITTEN CONSENT TO
A BALLOT VACANCY FOR A CITY OR TOWN OFFICE IN 2023**

State Form 49038 (R6 / 8-22)
Indiana Election Division (IC 3-13-1-10.5; IC 3-13-1-14; IC 3-13-2-7)

FILED (CAN-48)

JUN 27 2023

INSTRUCTIONS: A declaration of candidacy to fill a ballot vacancy must be filed no later than 72 hours before the caucus to fill the vacancy. For city or town offices, the declaration is filed with the county chairman of the county (or their designee) in which the greatest part of the election district is located (see IC 3-13-1-8) and the official who receives the certificate of candidate selection under IC 3-13-1-15.

DEBBIE STEWART
Clerk Howard Cir. Court

TO THE Democratic Party or the Republican Party CHAIR, Howard COUNTY, STATE OF INDIANA:

GENERAL INFORMATION

I, Robert David Stephenson, the undersigned, certify the following:
First Name of Candidate Middle Name of Candidate Last Name of Candidate

(1) I am a registered voter of Precinct _____ of the Township of Center
(or of Ward, if applicable, 2 of the City or Town of Kokomo), County of Howard
State of Indiana.

(2) I give my written consent for you to certify my name to the appropriate election official under IC 3-13-1-15 to be placed on the official municipal election ballot of the (check one) Democratic Party OR the Republican Party for the office of
Kokomo Common Council, District 2 (if any)
Name of Office
in the (check one box) City or the Town of Kokomo to be voted on at the municipal election to be held on November 7, 2023, if I am chosen as the above-named party's candidate by its caucus or authorized committee under IC 3-13-1 (or if I am appointed as the party's candidate when no caucus is required to be held).

(3) If I am a candidate for selection by a caucus of precinct committeemen of the political party, I am also filing a copy of this declaration with the Circuit Court Clerk of the above county at least seventy-two (72) hours before the time fixed for the caucus of the political party.

(4) I comply with all requirements under the laws of the State of Indiana to be a candidate for this office (including any applicable residency requirement), and I am not ineligible to be a candidate due to a criminal conviction that would prohibit me from serving in this office.

RESIDENCY INFORMATION

(5) My complete residence address is:
132 Conradt Ave Kokomo, IN 46901
Complete residence address must be included City ZIP Code

(6) My mailing address is:
Write address if mailing address is different from residence address; write "SAME" if both addresses are identical
_____, IN _____
Mailing Address City ZIP Code

CANDIDATE NAME INFORMATION

I request that my name appear on the municipal election ballot in the following manner:

Bob Stephenson
(Include any Nickname and/or Suffix, such as Jr., Sr., II, III, IV)

I also request that my name on my voter registration record be the same as the name on this declaration of candidacy. (IC 3-8-2-7(c))

The candidate's name must comply with the requirements in Indiana Code 3-5-7. If a candidate's name does not comply with this state law, the declaration may be challenged under Indiana Code 3-8-1-2. A candidate may use a nickname on the ballot only if the nickname is a name by which the candidate is commonly known and does not exceed 20 characters. A candidate may not use a title or degree as a designation or a designation that implies a title or degree. Nicknames are required to be printed on the ballot using parentheses. EXAMPLE: John R. (Jack) Doe

↓ PLEASE COMPLETE REVERSE OF FORM ↓



**STATEMENT OF ECONOMIC INTERESTS
FOR LOCAL AND SCHOOL BOARD OFFICES**

State Form 55128 (R / 8-19)
Indiana Election Division (IC 3-8-9)

FILED

(CAN-12)

JUN 27 2023

INSTRUCTIONS: This statement must be filed with a candidate's: (1) declaration of candidacy for nomination and primary to town, party convention; (2) certificate of nomination by a Libertarian Party convention; (3) petition of nomination as a school board candidate; (4) petition of nomination as a minor party or independent candidate; (5) declaration of intent to be a write-in candidate; or (6) certificate of candidate selection to fill an early or late vacancy on a general or municipal election ballot. This statement must also be filed no later than noon 60 days after an individual assumes a vacant local office. **NOTE:** A candidate who files a petition of nomination for an office in a county that has a separate voter registration board from the circuit court clerk's office must file this statement with the petition of nomination after the petition has been certified by the voter registration board and when it is presented for filing with the office described in IC 3-8-2-6.

STATE OF INDIANA
COUNTY OF Howard

INFORMATION FOR THE CALENDAR YEAR BEFORE THE DATE OF THIS FILING:

2022

NOTE: Insert "Not Applicable" where appropriate.

I, Robert D. Stephenson the undersigned, certify the following:
Name of Candidate or Person Filling Vacant Office

- (1) The elected office which I seek as a candidate, or to which I have been appointed to fill a vacancy is
Kokomo Common Council, District 2 (Include district, if applicable.)
- (2) The name of my spouse was Tonya D. Stephenson
- (3) The name of my employer and the nature of its business was
Literacy Coalition of Kokomo-Howard County, Inc. Non-Profit
- (4) The name of the employer of my spouse and the nature of its business was
Kokomo Housing Authority - public housing
- (5) If I owned a sole proprietorship, the name of the sole proprietorship and the nature of its business was
Not Applicable
- (6) If I operated a professional practice, the name of the professional practice and the nature of its business was
Not Applicable
- (7) If I was a member of a partnership, the name of the partnership and the nature of its business was
Not Applicable
- (8) If my spouse was a member of a partnership, the name of the partnership and the nature of its business was
Not Applicable
- (9) If I was a member of a limited liability company, the name of the limited liability company and the nature of its business was
Not Applicable
- (10) If my spouse was a member of a limited liability company, the name of the limited liability company and the nature of its business was
Not Applicable
- (11) If I was an officer or a director of a corporation (other than a church), the name of the corporation and the nature of its business was _____
- (12) If my spouse was an officer or a director of a corporation (other than a church), the name of the corporation and the nature of its business was Not Applicable

COMPLETE THE AFFIRMATION ON REVERSE SIDE OF THIS FORM.

CANDIDATE CERTIFICATION

(7) By initialing, I acknowledge that, if required, I have attached a copy of the applicable statement of economic interests, filed stamped by the office required to receive the statement, or a receipt or photocopy of a receipt showing that this statement of economic interest has been filed, to be filed with the CAN-49 certificate of candidate selection form in the office of the appropriate circuit court clerk (initial here) _____

(8) By initialing, I acknowledge that I might be required to file a surety bond before serving in office. (initial here) RDS

(9) By initialing, I acknowledge that I might be required to complete training or have attained certification related to service in office. (initial here) RDS

(10) By initialing, I acknowledge that I am aware of the provisions of the Indiana Campaign Finance Act (IC 3-9) regarding campaign finance and the reporting of campaign finance contributions and expenditures and I agree to comply with the provisions of IC 3-9. (initial here) RDS

(11) I have been a candidate for state, state legislative, or local office in a previous primary, municipal, special, or general election: (check one) Yes No If the answer to this question is no, skip paragraph 12 and proceed to paragraph 13.

(12) I have filed all reports required by IC 3-9-5-10 for all previous candidacies: Yes No (Check one)

(13) (This paragraph applies to a candidate for a local office if the local office receives compensation of at least \$5,000 per year, or to a local office if the local office receives compensation of less than \$5,000 but the candidate raises or spends more than \$500.) I have filed a campaign finance statement of organization for my principal candidate's committee with the appropriate county election board OR I am aware that I may be required to file the campaign finance statement of organization not later than noon, seven (7) days after the final date to file this declaration of candidacy. (initial here) RDS

I certify that the information in this Declaration of Candidacy is true and complete, and that I meet the specific requirements of this office.

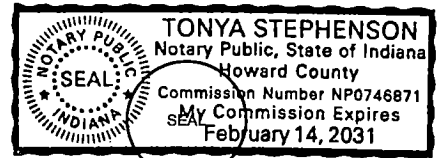
Robert D Stephenson
Signature

6/22/2023 (765) 461-8561
Date Signed (MM/DD/YYYY) Telephone (Day) Telephone (Evening)

OPTIONAL INFORMATION:

Candidate's email: _____ Campaign website: _____

STATE OF Indiana
COUNTY OF Howard
Subscribed and sworn to before me this 22 day of June, 2023.



Tonya Stephenson
Notary Public or Other Official Administering Oath according to IC 33-42-9-7

My Commission expires (applies only to Notary Public): February 14, 2031 County of Residence: Howard

CAMPAIGN FINANCE NOTICE

A candidate who fills a ballot vacancy thirty (30) days or more before the municipal election must file campaign finance reports in accordance with IC 3-9-5-8.5. A candidate who fills a ballot vacancy less than thirty (30) days before the municipal election must file campaign finance reports in accordance with IC 3-9-5-8.5.

The candidate's committee must also file a pre-municipal election supplemental report no later than forty-eight (48) hours after the committee receives contributions from a person that total \$1,000 or more during the period beginning **October 14, 2023 and ending November 5, 2023**, with the appropriate county election board. If no such contribution is received, the candidate's committee is not required to file a supplemental report.

A person who fails to file a report with a county election board is subject to a civil penalty of \$50 for each day the report is late, with the afternoon of the final date for filing the report being calculated as the first day, for a maximum penalty of not more than \$1,000, plus any investigative costs incurred and documented by the county election board.



Howard County Democratic Party

Meeting Minutes

May 9, 2023

Meeting was called to order by Chair Lisa Washington at 6:37 pm, followed by the reciting of the Pledge.

Motion to approve April minutes by Steve Daily; approved & passed.

Chair Report

- Guest Speaker
 - Sherry Roe; Author "Profits Over People"

Treasurer Report

- Balance On Hand: \$2,809.69
- Income Total 2,544.14; Expenses (\$2,844.23); Net Income (-300.09)
- Big Thank You To Steve Daily For Helping Secure Numerous Donations
- Still Need Monthly Recurring Donations; Monthly Sponsors; Help On Finance Committee
- Motion To Approve by Gary Rhinebarger, approved & passed.

Secretary Report

- Communication OutReach
 - SnailMail
 - Needs Funding - \$1/per member each month
 - Marketing
 - SocialMedia
 - Facebook, Instagram, TikTok, Twitter (In-Progress)
 - WebSite/App
 - www.howardcountymdemocraticparty.com





Howard County Democratic Party

Meeting Minutes

May 9, 2023

Committee Report

- **Women's Committee:** Met On June 3rd And Will Meet Again On Monfor A Wonderful Business Meeting, Day, August 7, 2023, At 5:30 Pm, Location Tbd.
- **Election Committee:** Needs Funding; From HCDPLiterature Signage &Shirts To Helping Candidates And Securing An Organized And Functional Gotv Movement.
- **Finance Committee:** Needs Volunteers For UpComing Events; Juneteenth; Trailer &Walkers For HaynesApperson Parade; Howard County Fairy
- **Communications Committee:** Needs Volunteers To Help With Newsletter, SocialMedia, And Blog.
- **Precincts Committee:** Need To Fill Captains &CoCaptains; Precinct Summer Socials Need To Start

Old/New Business

- Tonya Stephenson Made A Motion To Allow HCDP Chair, Lisa Washington To Fill Candidacy Vacancies WithOut The Approval From The Caucus. The Motion Was Seconded By Donnie Haywoth; And Passed Unanimously.

Motion To Adjourn Meeting Made By Bob Stephenson And Passed At 8:04 Pm.