



**REGULAR PARTY COMMITTEE
STATEMENT OF ORGANIZATION**

(CFA - 3)

State Form 46413 (R5/0-09)
Indiana Election Commission (IC 3-9-1-3 and IC 3-9-1-4)

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

FILE NUMBER

1. IS THIS AN AMENDMENT? <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES - If YES, please enter the file number in this box		<input checked="" type="checkbox"/>	7965
SECTION A COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.			
2. Fill name of committee (Do Not Abbreviate)		<input type="checkbox"/> Check if this is a new name	3. Acronym or Abbreviated Name (if any)
Boone County Democratic Central Committee		BC Dems	
4. Mailing Address (Address where all campaign finance correspondence is received)		<input type="checkbox"/> Check if this is a new address	5. E-mail address (Optional)
PO Box 248		chair@bcdemocrats.com	
6. City	State	Zip Code	7. FAX (Optional)
Lebanon	IN	46052	8. Telephone
		317-344-9063	
9. Committee Organization Date (MM-DD-YY)			
03/01/2025			
10. Is this committee registered with the Federal Election Commission? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
11. Type of Regular Party Committee (Check one)			
<input type="checkbox"/> National <input checked="" type="checkbox"/> State <input type="checkbox"/> Congressional District <input type="checkbox"/> County <input type="checkbox"/> City <input type="checkbox"/> Town			
12. Party Affiliation (Check one)			
<input checked="" type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input type="checkbox"/> Republican <input type="checkbox"/> Other			
13. Chairperson's Name		<input checked="" type="checkbox"/> Check if this is a new chairperson	
Eliana Armstrong		14. E-mail address (Optional)	
chair@bcdemocrats.com			
15. Mailing Address		<input type="checkbox"/> Check if this is a new address	16. Telephone (Day)
PO Box 248 Lebanon IN 46052		317-344-9063	
17. Telephone (Evening)		317-344-9063	
18. Treasurer's Name		<input checked="" type="checkbox"/> Check if this is a new treasurer	
Tanya Schnelzer		19. E-mail address (Optional)	
treasurer@bcdemocrats.com			
20. Mailing Address		<input type="checkbox"/> Check if this is a new address	21. Telephone (Day)
PO Box 248 LEBANON IN 46052		317-344-9063	
22. Telephone (Evening)		317-344-9063	
23. Custodian of Records' Name		<input checked="" type="checkbox"/> Check if this is a new custodian	
Tanya Schnelzer		24. E-mail address (Optional)	
treasurer@bcdemocrats.com			
25. Mailing Address		<input type="checkbox"/> Check if this is a new address	26. Telephone (Day)
PO Box 248 Lebanon IN 46052		317-344-9063	
27. Telephone (Evening)		317-344-9063	
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.)			
PNC Bank			
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	Signature of the Committee Chairperson
		Tanya Schnelzer	
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			
Confirm Nbr: 16394			
Filed: 4/18/2024 8:30:00AM			
31. Typed or printed name of Treasurer			
Tanya Schnelzer		Signature of Treasurer	Date (MM-DD-YY)
		31/1/2025	
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			
Eliana Armstrong		Signature of Chairperson	Date (MM-DD-YY)
		03/01/25	
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 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			