

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines.

12FE4M5

Frugal Hoosiers

ADDRESS (number and street)

3145 Dr. Andrew J. Brown Ave

☐(Check if address
is changed)

Indianapolis

CITY ▲

IN

STATE ▲

46205

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒(Check if address
is changed)

info@campaignfinancial.com

Optional Second E-Mail Address

frugalhoosiers317@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address
is changed)

2. DATE

M M / D D / Y Y Y Y
12 / 21 / 2018

3. FEC IDENTIFICATION NUMBER ►

C C00591131

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ledo, Ben, , Mr.,

Signature of Treasurer

Ledo, Ben, , Mr.,

[Electronically Filed]








Date

M M / D D / Y Y Y Y
12 / 21 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

1.  FEC ID number **C** 
2.  FEC ID number **C** 
3.  FEC ID number **C** 
4.  FEC ID number **C** 

Write or Type Committee Name

Frugal Hoosiers

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Ledo, Ben, , Mr.,

Mailing Address 3145 Dr. Andrew J. Brown Ave

Indianapolis

IN

46205

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 317 - 509 - 4639

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Ledo, Ben, , Mr.,

Mailing Address 3145 Dr. Andrew J. Brown Ave

Indianapolis

IN

46205

Title or Position
Treasurer

CITY

STATE

ZIP CODE

Telephone number 317 - 509 - 4639

Full Name of
Designated
Agent

Oesterle, William, , ,

Mailing Address

3145 North Dr. Andrew J. Brown Ave

Indianapolis

CITY

IN

STATE

46205

ZIP CODE

Title or Position

Chairman

Telephone number

317

509

4359

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of Indianapolis

Mailing Address

107 North Pennsylvania Street

Suite 700

Indianapolis

CITY

IN

STATE

46204

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE