



**CANDIDATE'S STATEMENT OF ORGANIZATION AND  
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE**  
State Form 4604 (R10/10-01)  
Indiana Election Commission (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

(CFA-1)

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

						FILE NUMBER
1. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If Yes, please enter the file number in this box →						32-05-005
<b>SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.</b>						
2. Last Name ZUSAN		First Name GREGORY		Middle Name ALLEN	Nickname GREG	
3. Type of Committee (Check one) <input type="checkbox"/> Candidate's Principal Committee <input checked="" type="checkbox"/> Exploratory Committee				6. E-mail address (Optional) GZUSAN@INDY.RR.COM		
4. Mailing Address 386 LONDON LANE				5. FAX (Optional)		
7. City AVON		State IN	Zip Code 46123	8. County HENDRICKS	9. Telephone (Day) (317) 272-0525	10. Telephone (Evening) (317) 272-0525
11. Party Affiliation <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Other				12. Office Sought (Include district number, if any. Not required for an exploratory committee.) AVON TOWN COUNCIL		
<b>SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.</b>						
13. Full Name of Committee (Do not abbreviate) <input checked="" type="checkbox"/> Check if this is a new name COMMITTEE TO ELECT GREGORY A. ZUSAN						
14. Mailing Address <input checked="" type="checkbox"/> Check if this is a new address 6696 ROYAL LANE				15. FAX (Optional) (317) 272-0525		16. E-mail address (Optional)
17. City AVON		State IN	Zip Code 46123	18. County HENDRICKS	19. Telephone (317) 272-0525	20. Committee organization date (MM-DD-YY) 08-01-05
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson <input type="checkbox"/> Check if this is a new chairperson GREGORY ALLEN ZUSAN						
22. Mailing Address <input type="checkbox"/> Check if this is a new address 386 LONDON LANE				23. FAX (Optional) (317) 272-0525		24. E-mail address (Optional)
25. City AVON		State IN	Zip Code 46123	26. County HENDRICKS	27. Telephone (Day) (317) 272-0525	28. Telephone (Evening) (317) 272-0525
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.) LINCOLN BANK						
30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.) TO RECEIVE AND EXPEND FUNDS TO EXPLORE THE OPPORTUNITIES FOR ELECTED OFFICE				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 checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)</b>						
32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee. PAUL GUCKENBERGER				Signature of the Committee Chairperson Gregory A. Zusan		
33. Treasurer's Full Name <input type="checkbox"/> Designate Candidate as Treasurer <input checked="" type="checkbox"/> Check if this is a new treasurer DONALD PAUL GUCKENBERGER II						
34. Mailing Address <input type="checkbox"/> Check if this is a new address 6696 ROYAL LANE				35. FAX (Optional)		36. E-mail address (Optional)
37. City AVON		State IN	Zip Code 46123	38. County HENDRICKS	39. Telephone (Day) (317) 272-2596	40. Telephone (Evening) (317) 272-2596
<b>SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)</b>						
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 Paul Guckenberger		
<b>SECTION E. CERTIFICATION OF STATEMENT</b>						
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 GREGORY ALLEN ZUSAN		Signature of Chairperson Gregory A. Zusan			Date (MM-DD-YY) 8-1-05	
43. Typed or printed name of Candidate GREGORY ALLEN ZUSAN		Signature of Candidate Gregory A. Zusan			Date (MM-DD-YY) 8-1-05	
<b>Warning:</b> 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 Class 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

AUG 04 2005

Cindy Spence

CLERK HENDRICKS CIRCUIT COURT  
SUPERIOR COURT