



**CANDIDATE'S STATEMENT OF ORGANIZATION AND
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE**
State Form 4604 (R11/11-05)
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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, please enter the file number in this box →										32-05-005
SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.										
2. Last Name ZUSAN		3. First Name GREGORY		4. Middle Name ALLEN		5. Nickname GREG		6. Designate one: <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee		
4. Mailing Address 386 LONDON LANE				5. FAX (Optional)		6. E-mail Address (Optional) GZUSAN@INDY.RR.COM				
7. City AVON		8. State IN	9. ZIP Code 46123	10. County HENDRICKS		11. Telephone (Day) (317) 272-0525		12. Telephone (Evening) (317) 272-0525		
13. Party Affiliation <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Other				14. Office Sought (Include district number, if any. Not required for an exploratory committee.) AVON TOWN COUNCIL - WARD 1						
SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.										
15. Full Name of Committee (Do not abbreviate) <input type="checkbox"/> Check if this is a new name COMMITTEE TO ELECT GREGORY A. ZUSAN										
16. Mailing Address <input type="checkbox"/> Check if this is a new address 6696 ROYAL LANE				17. FAX (Optional) (317) 272-0525		18. E-mail Address (Optional)				
19. City AVON		20. State IN	21. ZIP Code 46123	22. County HENDRICKS		23. Telephone (Day) (317) 272-0525		24. Committee Organization Date (MM-DD-YY) 08-01-05		
25. 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										
26. Mailing Address <input type="checkbox"/> Check if this is a new address 386 LONDON LANE				27. FAX (Optional) (317) 272-0525		28. E-mail Address (Optional)				
29. City AVON		30. State IN	31. ZIP Code 46123	32. County HENDRICKS		33. Telephone (Day) (317) 272-0525		34. Telephone (Evening) (317) 272-0525		
35. 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										
36. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.)										
37. 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										
SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)										
38. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee.				39. Person Appointed Treasurer PAUL GUCKENBERGER			40. Signature of the Committee Chairperson <i>Gregory A. Zusan</i>			
41. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer <input type="checkbox"/> Check if this is a new treasurer DONALD PAUL GUCKENBERGER II										
42. Mailing Address <input type="checkbox"/> Check if this is a new address 6696 ROYAL LANE				43. FAX (Optional)		44. E-mail Address (Optional)				
45. City AVON		46. State IN	47. ZIP Code 46123	48. County HENDRICKS		49. Telephone (Day) (317) 272-2596		50. Telephone (Evening) (317) 272-2596		
SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)										
51. 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).				52. Signature of Person Accepting Appointment <i>Paul Guckenberg</i>						
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.										
53. Typed or Printed Name of Chairperson GREGORY ALLEN ZUSAN				54. Signature of Chairperson <i>Gregory A. Zusan</i>			55. Date (MM-DD-YY) 1-14-06			
56. Typed or Printed Name of Candidate GREGORY ALLEN ZUSAN				57. Signature of Candidate <i>Gregory A. Zusan</i>			58. Date (MM-DD-YY) 1-14-06			
Warning: 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

JAN 18 2006

Cindy Spence
HENDRICKS CIRCUIT
SUPERIOR COURT