



**CANDIDATE'S STATEMENT OF ORGANIZATION AND
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE**
State Form 4604 (R15 / 5-19)
Indiana Election Division (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? ☒ Yes ☐ No If Yes, please enter the file number in this box. → 2023-36

SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

2. Last Name Zulich	First Name Sydney	Middle Name Megan	Nickname	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) 116.5 N Walnut Street Apt 8 Bloomington, IN 47404			5. FAX (Optional)	6. E-mail Address (Optional) ZulichforCouncil@gmail.com
7. City Bloomington	State IN	ZIP Code 47404	8. County Monroe	9. Telephone (Day) (614) 448-8154 10. Telephone (Evening) (614) 448-8154
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.) Bloomington Common Council District 6	

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. Committee to Elect Sydney Zulich				
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 116.5 N Walnut Street Apt 8 Bloomington, IN 47404			15. FAX (Optional)	16. E-mail Address (Optional) ZulichforCouncil@gmail.com
17. City Bloomington	State IN	ZIP Code 47404	18. County Monroe	19. Telephone (614) 448-8154 20. Committee Organization Date (mm/dd/yy) 04/26/2023
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Sydney Zulich				
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 116.5 N Walnut Street Apt 8 Bloomington, IN 47404			23. FAX (Optional)	24. E-mail Address (Optional) ZulichforCouncil@gmail.com
25. City Bloomington	State IN	ZIP Code 47404	26. County Monroe	27. Telephone (Day) () 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.) The Peoples State Bank				
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 checked="" 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. Sydney Zulich	Signature of the Committee Chairperson Sydney Zulich
33. Treasurer's Full Name <input checked="" type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. Sydney Zulich	
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 116.5 N Walnut Street Bloomington, IN 47404	
35. FAX (Optional)	36. E-mail Address (Optional)
37. City Bloomington	38. County Monroe
39. Telephone (Day) ()	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 Sydney Zulich
--	--

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 Sydney Zulich	Signature of Chairperson Sydney Zulich	Date (mm/dd/yy) 07/03/2023
43. Typed or Printed Name of Candidate Sydney Zulich	Signature of Candidate Sydney Zulich	Date (mm/dd/yy) 07/03/2023

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 03 2023

CLERK MONROE CIRCUIT COURT.

JUL 3 AM 9:21