



CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

(CFA-1)

State Form 4604 (R14 / 10-17)
Indiana Election Division (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

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. →*

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

2. Last Name Bingham		First Name Daniel		Middle Name Tracy	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) 1706 W. 8th Street				5. FAX (Optional) ()		6. E-mail Address (Optional)	
7. City Bloomington	State IN	ZIP Code 47404	8. County Monroe	9. Telephone (Day) (812) 361-7449		10. Telephone (Evening) ()	
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.) City Council, District 2				

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. Daniel Bingham for City Council							
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 1706 W. 8th Street				15. FAX (Optional) ()		16. E-mail Address (Optional) danielbinghamforbloomington@gmail.com	
17. City Bloomington	State IN	ZIP Code 47404	18. County Monroe	19. Telephone (812) 361-7449		20. Committee Organization Date (mm/dd/yy)	
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Daniel Bingham							
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 1706 W. 8th Street				23. FAX (Optional) ()		24. E-mail Address (Optional)	
25. City Bloomington	State IN	ZIP Code 47404	26. County Monroe	27. Telephone (Day) (812) 361-7449		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.) 10 Credit Union							
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.			Person Appointed Treasurer Daniel Bingham		Signature of the Committee Chairperson <i>Da</i>		
33. Treasurer's Full Name <input checked="" type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. Daniel Bingham							
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 1706 W. 8th Street				35. FAX (Optional) ()		36. E-mail Address (Optional)	
37. City Bloomington	State IN	ZIP Code 47404	38. County Monroe	39. Telephone (Day) (812) 361-7449		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 <i>Da</i>	
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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 Daniel Bingham	Signature of Chairperson <i>Da</i>	Date (mm/dd/yy) 2-4-18
43. Typed or Printed Name of Candidate Daniel Bingham	Signature of Candidate <i>Da</i>	Date (mm/dd/yy) 2-4-18

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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).

CLERK MONROE CIRCUIT COURT