



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

**(CFA-1)**

State Form 4604 (R15 / 5-19)  
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 Haughton		First Name Valeri		Middle Name	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) 3108 N. Ramble Rd. E				5. FAX (Optional) ( )		6. E-mail Address (Optional) vhaughton@gmail.com	
7. City Bloomington	State IN	ZIP Code 47408	8. County Monroe	9. Telephone (Day) (812) 327-7956		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.) Judge of the Monroe Circuit Court, 10th Judicial Circuit, No. 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 Re-Elect Judge Valeri Haughton							
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 3108 N. Ramble Rd. E				15. FAX (Optional) ( )		16. E-mail Address (Optional) valerahaughtonforjudge2020@gmail.com	
17. City Bloomington	State IN	ZIP Code 47408	18. County Monroe	19. Telephone (812) 327-7956		20. Committee Organization Date (mm/dd/yy) 01/16/20	
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. Valeri Haughton							
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 3108 N. Ramble Rd. E				23. FAX (Optional) ( )		24. E-mail Address (Optional) valerahaughtonforjudge2020@gmail.com	
25. City Bloomington	State IN	ZIP Code 47408	26. County Monroe	27. Telephone (Day) (812) 327-7956		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.) Indiana University 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 Jillian Kinzie			Signature of the Committee Chairperson <i>V. Haughton</i>				
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. Jillian Kinzie							
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. 2825 N. Blue Slopes Dr.				35. FAX (Optional) ( )		36. E-mail Address (Optional) jilliankinzie@gmail.com	
37. City Bloomington	State IN	ZIP Code 47408	38. County Monroe	39. Telephone (Day) (812) 325-2675		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>Jillian Kinzie</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 Valeri Haughton	Signature of Chairperson <i>V. Haughton</i>	Date (mm/dd/yy) 01/16/20
43. Typed or Printed Name of Candidate Valeri Haughton	Signature of Candidate <i>V. Haughton</i>	Date (mm/dd/yy) 01/16/20

FOR OFFICE USE ONLY

**FILED**

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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