



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

(CFA-1)

State Form 4604 (R13/9-10)
Indiana Election Commission (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? No Yes 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 BRADLEY		First Name GEOFFREY		Middle Name JAMES		Nickname		3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee	
4. Mailing Address 2602 NORTH CASCADE DRIVE				5. FAX (Optional)		6. E-mail Address (Optional) geoffbradley47404@gmail.com			
7. City BLOOMINGTON		State IN	ZIP Code 47404	8. County MONROE		9. Telephone (Day) (812) 929-9981		10. Telephone (Evening) (812) 929-9981	
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.) MONROE COUNTY CIRCUIT COURT JUDGE					

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 THE COMMITTEE TO ELECT GEOFF BRADLEY									
14. Mailing Address <input type="checkbox"/> Check if this is a new address P.O. Box 2195				15. FAX (Optional)		16. E-mail Address (Optional)			
17. City BLOOMINGTON		State IN	ZIP Code 47402	18. County MONROE		19. Telephone (812) 269-2309		20. Committee Organization Date (MM-DD-YY) 10-13-17	
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson <input type="checkbox"/> Check if this is a new chairperson									
22. Mailing Address <input type="checkbox"/> Check if this is a new address 2602 NORTH CASCADE DRIVE				23. FAX (Optional)		24. E-mail Address (Optional) geoffbradley47404@gmail.com			
25. City BLOOMINGTON		State IN	ZIP Code 47404	26. County MONROE		27. Telephone (Day) (812) 269-2309		28. Telephone (Evening) (812) 269-2309	
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 checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

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 MIKE SZAKALY			Signature of the Committee Chairperson <i>Geoff Bradley</i>		
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer <input checked="" type="checkbox"/> Check if this is a new treasurer MICHAEL JOHN SZAKALY, JR.								
34. Mailing Address <input type="checkbox"/> Check if this is a new address P.O. Box 2195				35. FAX (Optional)		36. E-mail Address (Optional) SZAKALY@GMAIL.COM		
37. City BLOOMINGTON		State IN	ZIP Code 47402	38. County MONROE		39. Telephone (Day) (812) 336-8376		40. Telephone (Evening) (812) 336-8376

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>Mike Szakaly</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 Geoffrey James BRADLEY		Signature of Chairperson <i>Geoff Bradley</i>		Date (MM-DD-YY) 10-24-17	
43. Typed or Printed Name of Candidate Geoffrey James BRADLEY		Signature of Candidate <i>Geoff Bradley</i>		Date (MM-DD-YY) 10-24-17	

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

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