



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4609 (R15 / 5-19)
Indiana Election Division (IC 3-9-5-14)

(CFA-4)
Summary Sheet

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

| |
|---|
| FILE NUMBER |
| |
| TOTAL PAGES IN ENTIRE CFA-4 REPORT |
| 1 |

IS THIS AN AMENDMENT? Yes No

COMMITTEE INFORMATION

| | | |
|---|--|---|
| 1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name. <u>Committee to Elect David Morris</u> | | 3. Committee Telephone Number <u>(260) 245-0360</u> |
| 2. Acronym or Abbreviated Name (if any) | | 4. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address. <u>11133 Roberts Rd</u> |
| 5. City, State, ZIP Code <u>Harlan, IN 46743</u> | | 6. Party Affiliation (if applicable) <u>Republican</u> |

CANDIDATE INFORMATION (For Candidate's Committees Only)

| | |
|---|---|
| 7. Full Name of Candidate (Include any nickname.) <u>David J. Morris</u> | 8. Party Affiliation or If Independent Candidate <u>Republican</u> |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.) | 10. County of Residence <u>Allen</u> |

TYPE OF REPORT

11. Check one:

Pre-Primary Pre-Election Annual Nomination Other _____

Final / Disbands Committee (Lines 18, 19, and 20 must be '0') Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)

CONVENTION CANDIDATES ONLY

Check one:

Pre-Convention Post-Convention

| | | |
|--|--------------------------------|---------------------------------|
| 12. Reporting Period (mm/dd/yy): From: <u>1/1/21</u> Through: <u>12/31/21</u> | COLUMN A This Period | COLUMN B Year to Date |
| 13. Cash on hand and investments at the beginning of this reporting period. | | |
| 14. Cash on hand and investments January 1, current year. | | |

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

| | | |
|---|---------------|---------------|
| 15a. Itemized (Use Schedule A.) | | |
| 15b. Unitemized | | |
| 15c. Add lines 15a and 15b in both columns. SUBTOTAL | | |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL | <u>400.00</u> | <u>400.00</u> |

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

| | | |
|---|---------------|---------------|
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) | | |
| 17b. Unitemized | | |
| 17c. Add lines 17a and 17b in both columns. SUBTOTAL | | |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) TOTAL | <u>400.00</u> | <u>400.00</u> |
| 19. Debts OWED BY the committee (Use Schedule D.) | | |
| 20. Debts OWED TO the committee (Use Schedule E.) | | |

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

| | | |
|--|------------------------|------------------------------------|
| Signature of Treasurer | Title <u>Treasurer</u> | Date (mm/dd/yy) |
| Signature of Candidate (if applicable) <u>David J. Morris</u> | | Date (mm/dd/yy) <u>01/14/22</u> |

FOR OFFICE USE ONLY

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Level 6 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, IC 3-9-4-18)