

Signature of Candidate (if applicable).

#### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

IS THIS AN AMENDMENT? Yes

(CFA-4) **Summary Sheet** 

=	N	u	M	П	J	IJ

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization) Check if this is a new r	name.		
Friends of Nicholas Nelson			
2. Acronym or Abbreviated Name (if any)	3. Committee Tel	ephone Number 06 - 8295	
	1 ( ,		<del> </del>
1917 Sherman Boylevard	Check if this is a nev		
5. City, State, ZiP Code	6. Party Affiliation	(if applicable)	
Fort wayne, IN, 46808			
CANDIDATE INFORMATION (For Candidate's C			10 . 81.4
7. Full Name of Candidate (Include any nickname.)  Wicholas Robert Wayne Nelson	8. Party Affiliation	or it independe	nt Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Res	·	
Allen County Surveyor	Allen	, do 1100	
TYPE OF REPORT	,,,,,,,	CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	, , , , , , , , , , , , , , , , , , , ,
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conv	vention
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend State	ement of Organization.)	Post-Cor	vention
12. Reporting Period (mm/dd/yy):	co	LUMN A	COLUMN B
From: Through:	Thi	s Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	1 2	00.00	
14. Cash on hand and investments January 1, current year.			80.00
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)	816	1 ~	
15a. Itemized (Use Schedule A.)	13 10	45.00	
15b. Unitemized			
15c. Add lines 15a and 15b in both columns.		1 ~	
	TOTAL   S	65 00	
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			
17b. Unitemized	TOTAL ACT	~ ()	
	IOIAL JU	0()	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL BO	00	
19. Debts OWED BY the committee (Use Schedule D.)			
20. Debts OWED TO the committee (Use Schedule E.)			
CERTIFICATION		F	OR OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TO	RUE, CORRECT AND C		
Signature of Treasurer 4000 Title	Date (mm/o	122 122	المُعْلِينَ فِي عَلَى

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)

Teasurer

FILED ELECTION BOOKD '22 JAN 24 M 10:43

Date (mm/dd/yy)



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

		FILEN	UMI	BER		
Page	1		of_		<u>}</u>	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy)  RECEIVED BY
"Timothy Barr	Contributions: Direct	     よっ <i>广 へ</i> つ		6-8-2020
1223 Normandale Dr. F. Wayne	In-Kind (describe)	\$25,00	\$25.00	
46808	Other Receipts: Interest Loan Miscellaneous (specify)			Nick Nelson
Contributor's Occupation (if required) Teacher				
35 Georgest San Juse CA		\$25.00	\$25.00	\$ 08-02-7-070
95110	Other Receipts: Interest Loan Miscellaneous (specify)			MICK Nelson
Contributor's Occupation (il required) Mail Carrier				
Nellie Rodriguez 1850 Idlewild Dr. #F2	Contributions:    Direct   In-Kind (describe)	\$10.00	\$10.w	8-3-2020
Reno NV 89509	Other Receipts:  Interest Loan  Miscellaneous (specify)			MYZIR NeMson
Contributor's Occupation (if required)				
*Marisela Plank 130 E. San Fornando St	Contributions:  Direct In-Kind (describe)	\$50.00 !	50.00	8-3-2024
San 505c. CA 95112	Other Receipts:  Interest Loan  Miscellaneous (specify)			
Contributor's Occupation (if required) Redired	<u> </u>			
" maria Gutierrez 1015 White Dr. Santa Clara CA 95051	Contributions: Direct In-Kind (describe)	\$100.00	\$ 100.00	8-5-2020
1	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (il required) Unemployed				
SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$ 210.00		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY 15a of the Summary Sheet.	\$		



State Form 4606 (R15 / 5-19)
Indiana Election Division (IC 3-9-5-14)

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	FILE	NUMBI	ER	
Page	7~	of	3	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)  RECEIVED BY
1. Grice Navarette 1220 Vienna Dr SPC492	Contributions:  X Direct In-Kind (describe)	\$ 20.00	\$20.00	0879-20
Sunny Vale, CA 94089	Other Receipts:  Interest Loan  Miscellaneous (specify)	t 		N. Nelson
2. Steven Aldred 2328 Lambert Ln	Contributions:  Direct In-Kind (describe)	\$50m	\$57)(2)	08-22-26
Fort Wayne, IN 46845	Other Receipts:  Interest Loan  Miscellaneous (specify)	forces	100.00	N. Nelson
Contributor's Occupation (if required)	Contributions:			
"Martha Le mart	Direct			88-24-20
1320 Junine Dr.	in-Kind (describe)	100.00	\$100.00	00000
Fort Wayne, IN46845	Other Receipts:  Interest Loan  Miscellaneous (specify)	(		N. Nelson
Contributor's Occupation (if required)				
* Sheila Campbell ,	Çontributions: Direct In-Kind (describe)	100.00	his	08-24-20
544 McKinnie Ave		(h).00	\$ 100.00	
Fort Ulayne, IN 46806	Other Receipts: Interest Loan Miscellaneous (specify)			N. Nelson
Contributor's Occupation (if required)	Contributions:			
"Huntington CO. Democratic Party 300 Circle Dr.	IXI Direct	\$50.00	\$50.00	09-17-20
Huntington, IN 46750	Other Receipts: Interest Loan Miscellaneous (specify)			N. Nelson
Contributor's Occupation (if required)				
SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$ 320.00		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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	FIL	E NUMB	ER	
Page _	3	of	3	

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS	CUMULATIVE	(mm/dd/yy) RECEIVED BY
	Contributions:	PERIOD	YEAR-TO-DATE	KEOCIYED DI
Chip coldiron	Direct In-Kind (describe)	\$ 25.00	\$25.00	09-16-20
418 Green wood Trail		3 20.00	40.00	
Ossian, IN 46777	Other Receipts:	ļ		Nicholas
Contributor's Occupation (if required)	Miscellaneous (specify)			Nelson
2.	Contributions;			
Meridith StumpF	Direct In-Kind (describe)		*	610 C-
2350 S. Harrison St.		610.00	\$10,00	\$ 10-9-20
Fort Wagne IN, 4/6807	Other Receipts:	710,00		Nicholas
	Miscellaneous (specify)			Nelson
Contributor's Occupation (if required)	Contributions:			70000h
Stephen Beckley	Direct	(		10-14-20
27/2 Creeping Phlox Cove	In-Kind (describe)	\$100.00	\$ 100,00	10 17 20
Fort Wayne, IN 46818	Other Receipts:	•	900	Nicholas
	Miscellaneous (specify)			Nelson
Contributor's Occupation (if required)	<u> </u>			70013011
* Nicholas Nelson	Contributions:			Ar >1>
1417 Sherman Blud.	In-Kind (describe) Self-Funding	120.00	\$200.00	105-21-20
Fortwayne IN 46808	Other Receipts:	•	1	
•	Miscellaneous (specify)			N. Nelson
Contributor's Occupation (if required)				
" Nicholas Nelson	Contributions:			09-24-20
1917 Sherman Blud	In-Kind (describe) Self-Funding	\$200.00	\$40000	1) 0 ( 50
Fort Wayne IN 46808	Other Receipts:		1	N. Nelson
· ·	Miscellaneous (specify)			0 - 1. 0 , , , , ,
Contributor's Occupation (it required)SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$ 5 25 10		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$ 5 35.00		
(Enter total on ITEM	15a of the Summary Sheet.)	Ψ		



State Form

### (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entitles OVER \$100 per recipient, within a catendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE	E NUME	BER	
Pa	ge	of	4	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZiP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN 8 CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code DA  Buildasign. Com  11525 A Stonehollow Dr.  Suite Job & 76768		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$153.00		06 101 /20 04/01/20
Code A Wix Com 500 Terry A Francois Sixth Floor Sen Francisco, CA 941574 USY		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Website Table	J 14.95		06/01/200
Code A Wix. LOM 500 Terry A Figureoid Sixth Floor San Francisco CA. 9415A USA		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose: Website   Heat Fee	\$17.00		06/03/20
Code A Facebook, Com 1 Hacker Way Men 10 Park, Ca 94025		Direct In-Kind Payment of Debt Returned Contribution Other Purpose	7)00		06/10/20
Sow terry A Francois Sixth Floor San Francisco CH 9415H USA		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Hos.1	\$17.00		OF 16120
Gode A Face book. Com  1 Heckerway  Menlo Park, CA  9 40 25		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose   Adversarias   Purpose   Pur	\$1.42		v7/67/10
Symmistaunship, Examinetti OH 45249		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose: Donation 'tools	\$1.19		97/01/20
	SUBTOTAL THIS PAG		\$ 204.56		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the	LAST PAGE ONLY e Summary Sheet.)	\$		



State Form

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	FILE	NUMB	ER	
	.,			
Page	2	of	4	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
(street, number, city, stale, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (he specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
Banners on the cheep.com 11525 a Stone Hollow Pr. Autin, TX 78758		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	£34,63		02/42160
Gode A wix.com  500 Terry A Francols  Sixth Flax San Francisco CA 9415A		Direct In-Kind Payment of Debt	\$ 17.00		OF151/20
Gode A mukestickers.com 8061 1864h St. Tinley Park, IL 60487		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:   Advectisment	\$11.07		08/06/20
Gode A Vista Print. Com 95 How den Av Lexington, MA 02421		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$35-31		08/05/20
10105 Lima Rd Fort wayne FN 46818		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$ 98.92		08/10/20
5110 Value Drive Fort Wayne, IN46808		Direct 🗆 In-Kind	\$62.42		08/10/20
Code F Vantiv Elammerae S800 Governor's Hill Dr. Symmes Township Cincinatti Ott 46249		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose: Fundantials   Purpose: Fundantials	4.50		08/11/20
	SUBTOTAL THIS PAG		\$ 254.80		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE		\$		



State Form

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	FILE	NUMBER	
Page	3	of	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
tan eer, number, city, state, zir tuue)	OFFICE SOUGHT (if applicable)	and PURPOSE (he specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
Code O PNC Bank 3730 Maplecroshed Fort Wayne, IN 116815		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose   Bankfees	\$1200		09/101/23
Code A Wix. Com  BOU Ferry A Francoi's Sixth Floor Scen Francisco 9415A USA		Direct In-Kind Payment of Debt Returned Contribution Other Purpose	\$17.00		09/08/120
Code Actblue. com 366 Summerst. Sommerville, MA O2/44		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Fund Tailing Tools	\$ 3.83		69 / <i>0</i> 3/38
Gode At Vistaprint.com G5 Hayden Au Lexington, MA 02421		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	\$67.39		09/10/2000
Gode A 24 Wrunstbands.com 1950 Beechnot St. #100 Houston, TX & 7083		Direct In-Kind	\$ 184.57		09/24/10
Code A 24 hrwristlands.com 14650 Beechnut St. #100 Houston, TX 75083		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose: Refund	1 164.57		29/29/20
Sixth Floor San Francisco 21415 A San Francisco 21415 A USA	,	Applied   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	\$17.00		10/01/20
	SUBTOTAL THIS PAGE		\$ 299 79		
TOTAL OF ALL PAC	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the	LAST PAGE ONLY	\$		



State Form

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FILE NUMBER						
Page	of					

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code O PNC Bank 3730 Maple Crest Rd Fort Wayne, IN 40815		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Ean K Fces	\$1000		
Banners on the Chear.com 11525 Stone Hollow Dr. Austin, TX 78758		DY Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$124.24		10/10/20
Code A Tractor Supply CO. 2112W Coliseum Blud Fort Wayne, IN46803		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose: Signs	\$39.50		10/11/20
Code D PNCBONK 3330 maplecrostild. Fortwadne IN 76815		Direct In-Kind	1303.47		1.
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct in-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG	E OF SCHEDULE B	\$ 173.77		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of th	LAST PAGE ONLY e Summary Sheet.)	\$		