

State Form 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 form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes No

(CFA-4) **Summary Sheet** 

FILE NUMBER

**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	name			
1. Full Name of Committee (as on Statement of Organization)				
2. Acronym or Abbreviated Name (if any)  3.		nittee Telep	phone Number 5-7676ILE	) ELECTION BOA
4. Mailing Address (Address where all campaign finance correspondence is received.) 408 Green St.	Check if this	s is a new	address. 2	2 JAW 14 PM1:21
5. City, State, ZIP Code New Haven, IN 46774		Affiliation ( ublicar	(if applicable) 1	. ,
CANDIDATE INFORMATION (For Candidate's (	Committee	es Only)		
7. Full Name of Candidate (Include any nickname.)  John Matthew Newbauer		Affiliation of ublicar	or If Independent (	Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.) New Haven City Council District 1	10. Cour Aller	nty of Resi	dence	
TYPE OF REPORT			CONVENTION	CANDIDATES ONLY
11. Check one:  Pre-Primary Pre-Election Annual Nomination Other			Check one:	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend Sta	stement of Orga	nization.)	Post-Conve	ntion
12. Reporting Period (mm/dd/yy): From: 11/01/2021 Through: 01/11/2022			LUMN A S Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			0	
14. Cash on hand and investments January 1, current year.				0
CONTRIBUTIONS AND RECEIPTS			ł	
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			0	
15a. Itemized (Use Schedule A.)			0	0
15b. Unitemized	TOTAL	<del></del>	0	0
Today lad since fed and fed are seen as			0	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL		0	0
(Note: These amounts include in-kind expenditures and loan repayments.)			+	
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			0	0
17b. Unitemized			0	0
	BTOTAL		0	0
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL		0	0
19. Debts OWED BY the committee (Use Schedule D.)			0	
20. Debts OWED TO the committee (Use Schedule E.)			0	
		····	E05	R OFFICE USE ONLY
CERTIFICATION  I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	TRUE COPP	FCT AND CO		VOLLIGE ORE OME
	I	ate (mm/de		
Signature Treasurer Treasurer Treasurer	I	-14-		

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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)

Date (mm/dd/yy) 1-14-2022



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.

FILE NUMBER		
Page	of	

midividual makes at least \$1,000 in contributions during the calondar ye	ar. estermos ano le opasitan			
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
	Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
2.	Contributions:			
	Direct			
	☐ In-Kind (describe)			
	Other Receipts: Interest Loan			
	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			
	L_I Miscenaneous (specify)			
Contributor's Occupation (if required)				
3.	Contributions:			
	Direct			
	n-Kind (describe)			
	Other Receipts:  Interest Loan		:	
	Miscellaneous (specify)			
	Miscellarieous (specify)			
Contributor's Occupation (if required)				
4.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:  Interest Loan			
	Miscellaneous (specify)			
	- Introductional (ahouna)			
Contributor's Occupation (if required)				
5.	Contributions:			
	☐ Direct ☐ In-Kind (describe)			
	In-Kind (describe)			
	Other Bereitster			
	Other Receipts:			
	Miscellaneous (specify)			
			-	
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY I 15a of the Summary Sheet.)	\$		
Enter total on 11 En	, iou or the duminary offeet.)			



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

### (CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS 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 corporations 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).

FILE NUMBER				
Page	1	of	1_	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	OR OTHER RECEIFT	PERIOD	YEAR-TO-DATE	RECEIVED BY
No contributions or balance during this time period.	Contributions:  Direct In-Kind (describe) Other Receipts:			
2.	Interest Loan Miscellaneous (specify)  Contributions:			
	Direct In-Kind (describe) Other Receipts:			
	Interest Loan Miscellaneous (specify)			
3.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Miscellaneous (specify)			
<b>5.</b> _	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.)	\$ 0.00		



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

#### (CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print (egibly 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 labor organizations 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).

FILE NUMBER				
Page	1	of	1	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy)  RECEIVED BY
No contributions were made by labor organizations.	Contributions:  Direct In-Kind (describe) Other Receipts: Interest Loan	PERIOD	TEAR-TO-DATE	
	Miscellaneous (specify)			
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Miscellaneous (specify)			
3.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Miscellaneous (specify)			
4.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Miscellaneous (specify)			
5.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$ 0.00		



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# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES 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 political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. 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).

FILE NUMBER				
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Page	1	of	1	

SIVEL MAILING ADDRES   STORE	CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
1. No contributions were made by PACs    Content   Instruct   Content   Cont		OR OTHER RECEIPT			
Direct   In-Kind (describe)		Contributions:	PERIOD	- FARTO-DATE	
Contributions:		Direct			
Interest   Loan   Miscellaneous (specify)		In-Kind (describe)			
Interest   Loan   Miscellaneous (specify)					
Miscellaneous (specify)					
Contributions:   Cont					
Contributions:   Cont					
In-Kind (describe)	2.		,		
Other Receipts:   Interest   Loan   Miscellaneous (specify)    3.   Contributions:   Direct   In-Kind (describe)     Interest   Loan   Miscellaneous (specify)    4.   Contributions:   Direct   In-Kind (describe)     Other Receipts:   Interest   Loan   Miscellaneous (specify)    5.   Contributions:   Direct   In-Kind (describe)     Interest   Loan   Miscellaneous (specify)    5.   Contributions:   Direct   In-Kind (describe)     Other Receipts:   Interest   Loan   Miscellaneous (specify)    Substitute   Loan   Miscellaneous (specify)    Substitute   Loan   Miscellaneous (specify)    TOTAL OF ALL PAGES OF SCHEDULE A S 0.00		l <u> </u>			
Interest Loan   Miscellaneous (specify)		In-Kind (describe)			
Interest   Loan   Miscellaneous (specify)  3.   Contributions:   Direct   In-Kind (describe)		Other Pecaints:			
3.   Contributions:   Direct   In-Kind (describe)		Interest Loan			
Direct   In-Kind (describe)		Miscellaneous (specify)			
Direct   In-Kind (describe)					
In-Kind (describe)	3.				
Other Receipts:   Interest   Loan		l <u> </u>			
Interest   Loan   Miscellaneous (specify)		in-Kind (describe)			
Interest   Loan   Miscellaneous (specify)		Other Receipts:			
4. Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)  5. Contributions: Direct In-Kind (describe) Other Receipts: In-Kind (describe) Other Receipts: Miscellaneous (specify) Other Receipts: Miscellaneous (specify) Other Receipts: Miscellaneous (specify)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 0.00					
Direct   In-Kind (describe)		Miscellaneous (specify)			
Direct   In-Kind (describe)					
In-Kind (describe)  Other Receipts: Interest Loan Miscellaneous (specify)  5,  Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 0.00	4.	l —			
Other Receipts:   Interest   Loan   Miscellaneous (specify)  5,  Contributions:   Direct   In-Kind (describe)  Other Receipts:   Inerest   Loan   Miscellaneous (specify)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 0.00  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY \$ 0.00		I <u> </u>			
Interest		III-Kind (desombly)			
Interest					
5.  Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify) TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY SUBTOTAL THIS PAGE ONLY CONTRIBUTIONS: Direct Interest Other Receipts: Contributions: Contri		1 <del></del>			
Other Receipts: Interest Loan Interest Loan Miscellaneous (specify)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 0.00		Miscellaneous (specify)			
Other Receipts: Interest Loan Interest Loan Miscellaneous (specify)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 0.00					
Other Receipts: Interest Loan Miscellaneous (specify)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 0.00  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY S 0.00	5.				
Other Receipts: Interest Loan Miscellaneous (specify)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 0.00  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY S 0.00					
SUBTOTAL THIS PAGE OF SCHEDULE A \$ 0.00					
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TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY S O OO			0.00		
minor town our read of the control o			\$ 0.00		



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#### (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND 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 other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. 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).

FILE NUMBER				
		-		
Page _	1	of	1	

<u> </u>				
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
(street, number, city, state, ZIP code)  1. No contributions made by "other organizations"	Contributions:	PENIOD	(LAIX-TO-DA) L	
1.	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
2.	Contributions:			
4.	Direct			
	In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	☐ Miscellaneous (specify)			
3.	Contributions:			
	☐ Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
4.	Contributions:		-	
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
5.	Contributions:			
	Direct			
	n-Kind (describe)			
	Other Receipts:  interest Loan			
	Miscellaneous (specify)			
	L Misoelieriooda (apecily)			
SUBTOTAL *	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE		\$ 0.00		
(Enter total on ITEN	1 15a of the Summary Sheet.)	\$ 0.00		



(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

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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 entities OVER \$100 per recipient, within a calendar 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 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)
No committee expenditures		☐ 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:			
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:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:			
TOTAL OF ALL PA	SUBTOTAL THIS PAC AGES OF SCHEDULE B ON THI (Enter total on ITEM 17a of t	E LAST PAGE ONLY	\$ 0.00 \$ 0.00		



State Form 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. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

# (CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

FILE NUMBER					
Page_	1	of	1		

		Page _	I of _	- <u> </u>		
PUBLIC QUES	TION INFORMATION					
Enter Text of Public Question.						
Type of Question: Statewide Local						
Position: Supported Opposed	+					
RECIPIENT'S NAME AND MAILING ADDRESS RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF EXPENDITURE		
(street, number, city, state, ZIP code)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)		
	☐ Direct ☐ In-Kind		·			
Code	Payment of Debt					
No Itemized expenditures	Returned Contribution					
	Other					
	Purpose:	:				
Code	☐ Direct ☐ In-Kind					
	Payment of Debt					
	Returned Contribution					
	Other					
	Purpose:					
Code	☐ Direct ☐ In-Kind					
0000	Payment of Debt					
	Returned Contribution					
	Other					
	Purpose:					
		· · · · · ·	<u> </u>			
Code	☐ Direct ☐ In-Kind					
	Payment of Debt					
	Returned Contribution					
	Other					
	Purpose:					
				<u> </u>		
Code	Direct In-Kind					
	Payment of Debt					
	Returned Contribution Other					
	Purpose:					
	☐ Direct ☐ In-Kind					
Code	☐ Direct ☐ In-Kind					
	Returned Contribution					
	Other					
	Purpose:					
	'					
SURTATAL THIS	SUBTOTAL THIS PAGE OF SCHEDULE C \$ 0.00					
TOTAL OF ALL PAGES OF SCHEDULE C OF						
(Enter total on ITEM 17:	of the Summary Sheet.)	\$ 0.00				



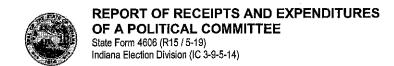
State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

### (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

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. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER			
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CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	(mm/dd/yy)	YEAR-TO-DATE	PERIOD
No Debts owed by Committee					
LENDER'S OCCUPATION:					
					-
				!	
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
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LENDER'S OCCUPATION:					
SUBTOTAL THIS PAGE OF SCHEDULE D			F SCHEDULE D	\$ 0.00	
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY			\$ 0.00		
(Enter total on ITEM 19 of the Summary Sheet.)			0.00		



## (CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

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. List all debts and loans, regardless of the amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

FILE NUMBER				
	<del> </del>			
Page	of			

BORROWER'S NAME AND MAILING ADDRESS	CO-SIGNER'S NAME AND MAILING ADDRESS (if any)	ORIGINAL AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	(mm/dd/yy)	YEAR-TO-DATE	PERIOD
No debts owed to this committee					
		CURTOR	THIS BASE OF	POHEDI! F F	• 000
SUBTOTAL THIS PAGE OF SCHEDULE E			\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summary Sheet.)				\$ 0.00	