



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (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

IS THIS AN AMENDMENT?  Yes  No

<b>FILE NUMBER</b>
<b>TOTAL PAGES IN ENTIRE CFA-4 REPORT</b>

### COMMITTEE INFORMATION

1 Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name <b>Hoosiers for Jerika Clawson</b>	
2 Acronym or Abbreviated Name (if any)	3 Committee Telephone Number <b>(260) 409-5899</b>
4 Mailing Address (Address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address <b>12024 Fisher Rd.</b>	
5 City State, ZIP Code <b>Ft. Wayne, IN 46818</b>	6 Party Affiliation (if applicable) <b>Republican</b>

### CANDIDATE INFORMATION (For Candidate's Committees Only)

7 Full Name of Candidate (Include any nickname.) <b>Jerika Leigh-Marie Clawson</b>	8 Party Affiliation or If Independent Candidate <b>Republican</b>
9 Office Sought (Include district number, if any. Not required for exploratory committee.) <b>Lake Township Trustee</b>	10 County of Residence <b>Allen</b>

### TYPE OF REPORT

### CONVENTION CANDIDATES ONLY

11 Check one: <input checked="" type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other _____ <input type="checkbox"/> Final / Disbands Committee (Lines 18, 19 and 20 must be '0') <input type="checkbox"/> Outgoing Treasurer (Within ten (10) days amend Statement of Organization)	Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention
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12 Reporting Period (mm/dd/yy) From <b>01/01/2022</b> Through <b>4/8/2022</b>	<b>COLUMN A This Period</b>	<b>COLUMN B Year to Date</b>
13 Cash on hand and investments at the beginning of this reporting period <b>0</b>	<b>0</b>	<b>0</b>
14 Cash on hand and investments January 1, current year. <b>0</b>		<b>0</b>

### CONTRIBUTIONS AND RECEIPTS

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

15a Itemized (Use Schedule A)	<b>0</b>	<b>0</b>
15b Unitemized	<b>0</b>	<b>0</b>
15c Add lines 15a and 15b in both columns <b>SUBTOTAL</b>	<b>0</b>	<b>0</b>
16 Add lines 13 and 15c in Column A and lines 14 and 15c in Column B <b>TOTAL</b>	<b>0</b>	<b>0</b>

### EXPENDITURES

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

17a Itemized (Use Schedule B.) (Public Question: use Schedule C)	<b>0</b>	<b>0</b>
17b Unitemized	<b>0</b>	<b>0</b>
17c Add lines 17a and 17b in both columns <b>SUBTOTAL</b>	<b>0</b>	<b>0</b>
18 Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) <b>TOTAL</b>	<b>0</b>	<b>0</b>
19 Debts OWED BY the committee (Use Schedule D)	<b>0</b>	
20 Debts OWED TO the committee (Use Schedule E)	<b>0</b>	

### CERTIFICATION

FOR OFFICE USE ONLY

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 <b>Christi Seifert</b>	Title <b>Treasurer</b>	Date (mm/dd/yy) <b>4/17/22</b>
Signature of Candidate (if applicable) <b>A Co</b>		Date (mm/dd/yy) <b>4/17/22</b>

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