

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 BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? | Yes | X

(CFA-4) **Summary Sheet**

FILE NUMBER
•
TOTAL PAGES IN ENTIRE CFA-4 REPORT
f

COMMITTEE INFORMATION				
1. Full Name of Committee, (as on Statement of Organization)				
Bruce A Hayes For Washington Toma Ship Board				
2. Acronym or Abbreviated Name (if any)	3. Com	3. Committee Telephone Number		
	(260	(260) 105-1851		
4. Mailing Address (Address where all campaign finance correspondence is received.) □ Check if this is a new address. □ 7h is tl∈ Lanc				
5. City, State, ZIP Code	6. Party Affiliation (if applicable)			
5. City, State, ZIP Code Fort WAY WE, IN 46825	Simocrat			
CANDIDATE INFORMATION (For Candidate's Committees Only)				
7. Full Name of Candidate (Include any nickname.)		8. Party Affiliation or If Independent Candidate		
Bruce 4 Hays		Dringent		
9. Office Sought (Include district number, if any. Not required for exploratory committee.) WASHING TOWN SHIP TRUSTER LOCALE		10. County of Residence		
TYPE OF REPORT			N CANDIDATES ONLY	
11. Check one:		Check one:		
Pre-Primary Pre-Election Annual Nomination Other				
Pre-Primary Pre-Election Annual Nomination Other Pre-Convention Pre-Convention Pre-Convention Pre-Convention Pre-Convention Pre-Convention Post-Convention Post-Conven				
12. Reporting Period (mm/dd/yy):	<u>'</u>	COLUMN A	COLUMN B	
From: 01/01/22 Through: 04/08/22		This Period	Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.		4		
14. Cash on hand and investments January 1, current year.			Ð	
CONTRIBUTIONS AND RECEIPTS	w *			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (Use Schedule A.)		<i>O</i>	-U	
15b. Unitemized		<i>Q</i>	Þ	
15c. Add lines 15a and 15b in both columns.	BTOTAL	Ð	. 0	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	θ	0	
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)		Ata-co		
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		Þ	0	
17b. Unitemized		Q	0	
17c. Add lines 17a and 17b in both columns.	JBTOTAL	0	.Q	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	O	8	
19. Debts OWED BY the committee (Use Schedule D.)		O		
20. Debts OWED TO the committee (Use Schedule E.)		0		
CERTIFICATION			OR OFFICE USE ONLY	
- CENTION		ng		

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. Title Ireasur Signature of Candidate, (if applicable)

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)

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