

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

No

IS THIS AN AMENDMENT? Yes

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

(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) Li Check if this is a new name.					
2. Acronym or Abbreviated Name (If any)	3. Com	mittee Telephone Numbe	Г		
NIA	(76	9 365-75]	35		
4. Mailing Address (Address where all campaign finance correspondence is received.) Check if this is a new address.					
7415 MEIZINGED DZ	., 				
5. City, State, ZIP Code	6. Party Affiliation (if applicable)				
F-WAYNE, IN 46835		INDEPENDENT			
CANDIDATE INFORMATION (For Candidate's Committees Only)					
7. Full Name of Candidate (Include any nickname.)	8. Party	8. Party Affiliation or If Independent Candidate			
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10 Cor	10. County of Residence			
ST JOE TOWNSHIP TRUSTEE		ALLEN			
TYPE OF REPORT			ON CANDIDATES ONLY		
11. Check one:		Check one:			
Pre-Primary X Pre-Election Annual Nomination Other	·		nvestion		
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)					
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B		
From: 0/01/22 Through: 10/24/22		This Period	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.			O .		
CONTRIBUTIONS AND RECEIPTS					
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			0		
15a, Itemized (Use Schedule A.)		<u> </u>	0		
15b. Unitemized		0			
Too. And filed Too and	TOTAL	ව	0		
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL.	6	0		
EXPENDITURES					
(Note: These amounts include in-kind expenditures and loan repayments.)					
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		0			
17b. Unitemized		<u> </u>	0		
17 C. Filed allow 11 Carlo 11	TOTAL	<u> </u>	12		
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	Q	\mathcal{O}		
19. Debts OWED BY the committee (Use Schedule D.)		\mathcal{O}			
20. Debts OWED TO the committee (Use Schedule E.)		0			
			FOR OFFICE LISE ONLY		

CER	TIFICATION			
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES	T OF MY KNOWLEDGE AND BELIEF IT IS TRUE, C	CORRECT AND COMPLETE.		
Signature of Treesurer	Title	Date (mm/dd/yy)		
	TREASUREIZ	10/24/22		
Signature of Candidate ((applicable)		Date (mm/dd/yy)		
		10/24/22		
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, I	C 3-9-4-17, IC 3-9-4-78)		

FILED ELECTION BOARD 22 OCT 25 ANS:06