JOHNHENRY

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 8-9-5-14)

INSTRUCTIONS: Plaase type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, sea instructions on the reverse side.

IS THIS AN AMENDMENT? Tyes X No.

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

1. Full Name of Committee (as on Statement of Organization) John D Henry for Trustee 2. Acronym or Abbreviated Name (if any) 3. Committee Telephone Number (260) 639-6251 4. Mailing Address (Address where all campelger finance correspondence is revolved.) 3. Committee Telephone Number (260) 639-6251 4. Mailing Address (Address where all campelger finance correspondence is revolved.) 3. Check if this is a new address. Charles and Committee (as on Statement of Correspondence is revolved.) 3. Check if this is a new address. Charles and Committee (as on Statement of Correspondence is revolved.) CANDIDATE INFORMATION (For Candidate S Committees Only) 7. Full Neire of Condidate (include any nickneme.) CANDIDATE INFORMATION (For Candidate S Committees Only) 7. Full Neire of Condidate (include any nickneme.) John D Henry 9. Carry Affiliation or if independent Candidate Republican 10. County of Residence Allen 11. Check one: 12. Prep Printing (include district number, if any. Not required for exploratory committee.) 13. Check one: 14. Check one: 15. Prep Printing (include district number, if any. Not required for exploratory committee.) 15. Reporting Period (included place is 18, and 20 mest to 90) 16. Check one: 16. Prep Printing (include district number, if any. Not required for exploratory committee.) 17. Prep Printing (include district number, if any. Not required for exploratory committee.) 18. Reporting Period (included include include included
2. Acronym or Abbraviated Name (if any)
4. Mailing Address (Address where all campaign finance corraspondence is recolved.) 4. Mailing Address (Address where all campaign finance corraspondence is recolved.) 5. City, State, 2 pr Code FORT Wayne, IN 46819 CANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full Name of Candidate (Include any nickname) John D. Henry 9. Office Sought (Include district number, if any, Not required for exploratory committee). Pleasant Township Trustee TYPE OF REPORT 10. Convention Candidate Type-Princey (Pre-Pietetton Annual Nomination Other Pre-Princey (Pre-Pietetton Pre-Princey (Pre-Pietetto
4. Mailing Address (Address where all campaign finance correspondence is recoived.) 13427 Thiele Road
3427 Thiele Road 6. Perty Affiliation (if applicable) Republican
Republican CANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full Name of Candidate (Include any nickname.) John D. Hehry 9. Office Sought (Include district number, if any. Not required for exploratory committee.) Pleasant Township Trustee TYPE OF REPORT 10. County of Residence Allen TYPE OF REPORT 11. Check one: Pre-Printing Expre-Election Annual Nomination Other Final Disbands Committee (Ince 16, 14, and 20 mest be '0') Outgoing Treasurer (Infinit ten [10] days amend Statement of Organization.) 12. Reporting Period (mm/dd/yy): From: 04/09/22 Through: 10/12/22 This Period CONTRIBUTIONS AND RECEIPTS (Note: these amounts Include In-kind contributions and loans, as well as each contributions.) 15a. Itemized (Use Schedula A.) 15b. Unitemized 0 0 0 15b. Unitemized 0 0 0 15c. Add lines 13 and 15b in both columns. SUBTOTAL 0 0 16b. Unitemized 0 0 0 17c. Add lines 47a and 17b in both columns, as Substotal C.) 17c. Add lines 47a and 17b in both columns, substocial or the reporting period (Subtract 17c from 16 in both columns.) 10 10 10 10 10 10 10 10 10 10 10 10 10 1
GANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full Name of Cendidate (Include any nickname.) John D. Henry Soffice Sought (Include district number, if any. Not required for exploratory committee.) Pleasant Township Trustee TYPE OF REPORT Convention Candidate Pro-Primary
8. Party Affiliation or if Independent Candidate John D Henry 10. County of Residence Republican
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Final / Disbailds Controllites (Unes 18, 18, and 20 must be '0') Outgoing Treasurer (With ten (10) days amend Statement of Organization.) Post-Convention
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From: 04/09/22 Through: 10/16/22 This Period Year to Date 13. Cash on hand and Investments at the beginning of this reporting period. 14. Cash on hand and Investments January 1, current year. CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as each contributions.) 15a. Itemized (Use Schedule A.) 0 0 15b. Unitemized 15c. Add lines 15a and 15b in both columns. SUBTOTAL 0 0 15c. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL 0 0 EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.) 17a. Itemized (Use Schedule B.) (Public Quastion: use Schedule C.) 0 0 17b. Unitemized 17c. Add lines 17e and 17b in both columns. SUBTOTAL 0 0 0 0 17c. Add lines 17e and 17b in both columns. SUBTOTAL 0 0 0 0 17c. Add lines 17e and 17b in both columns. SUBTOTAL 0 0 0 0 17c. Add lines 17e and 17b in both columns. SUBTOTAL 0 0 0 0 17c. Add lines 17e and 17b in both columns. SUBTOTAL 0 0 0 0 17c. Add lines 17e and 17b in both columns. SUBTOTAL 0 0 17d. Debts OWED BY the committee (Use Schedule D.)
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20. Debts OWED TO the committee (Use Schedule E)
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CERTIFICATION FOR OFFICE USE ONLY
CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. Signature of Treasurer Title Date (mm/dd/yy)
Candidate 10/14/22
Signature of Candidate (If applicable) Date (mm/dd/yy)
10/14/22
VARNING: 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