



# 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

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

**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

### COMMITTEE INFORMATION

|  |   |
|--|---|
| 1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name.<br><u>Claude Schrock Election Committee</u>            |   |
| 2. Acronym or Abbreviated Name (if any)  | 3. Committee Telephone Number<br><u>(760) 633-5120</u>    |
| 4. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address.<br><u>14120 Maple Drive</u> |   |
| 5. City, State, ZIP Code<br><u>Grabill, IN 46741</u>   | 6. Party Affiliation (if applicable)<br><u>Republican</u> |

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

|   |   |
|---|---|
| 7. Full Name of Candidate (Include any nickname.)<br><u>Claude Eugene Schrock</u>   | 8. Party Affiliation or If Independent Candidate<br><u>Republican</u> |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.)<br><u>Grabill Town Council Member</u> | 10. County of Residence<br><u>Allen</u>                               |

### TYPE OF REPORT

### CONVENTION CANDIDATES ONLY

|   |   |
|---|---|
| 11. Check one:<br><input type="checkbox"/> Pre-Primary <input checked="" type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other<br><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:<br><input type="checkbox"/> Pre-Convention<br><input type="checkbox"/> Post-Convention |
|---|---|

|   |                         |                          |
|---|-------------------------|--------------------------|
| 12. Reporting Period (mm/dd/yy):<br>From: _____ Through: _____              | COLUMN A<br>This Period | COLUMN B<br>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.                   |                         | <u>50.00</u>             |

### CONTRIBUTIONS AND RECEIPTS

|   |  |              |
|---|--|--------------|
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) |  |              |
| 15a. Itemized (Use Schedule A.)   |  |              |
| 15b. Unitemized   |  |              |
| 15c. Add lines 15a and 15b in both columns. <b>SUBTOTAL</b>                                   |  | <u>0</u>     |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. <b>TOTAL</b>           |  | <u>50.00</u> |

### EXPENDITURES

|   |  |              |
|---|--|--------------|
| (Note: These amounts include in-kind expenditures and loan repayments.)   |  |              |
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)  |  |              |
| 17b. Unitemized   |  |              |
| 17c. Add lines 17a and 17b in both columns. <b>SUBTOTAL</b>   |  | <u>0</u>     |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) <b>TOTAL</b> |  | <u>50.00</u> |
| 19. Debts OWED BY the committee (Use Schedule D.)   |  |              |
| 20. Debts OWED TO the committee (Use Schedule E.)   |  |              |

### CERTIFICATION

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<br><u>Margaret E. Schrock</u>               | Title<br><u>Treasurer</u> | Date (mm/dd/yy)<br><u>10/15/22</u> |
| Signature of Candidate (if applicable)<br><u>Claude E. Schrock</u> |                           | Date (mm/dd/yy)<br><u>10-17-22</u> |

### FOR OFFICE USE ONLY

FILED ELECTION BOARD  
22 OCT 19 PM 2:50

**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)