

## 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

IS THIS AN AMENDMENT? Yes V No

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)  Unathon Scott Yoder  Check if this is a new name.				
Acronym or Abbreviated Name (if any)     Scott Yoder	7.000,000,000	Committee Telephone Number 260 ) 241-5301		
4. Mailing Address (Address where all campaign finance correspondence is received.)  11139 Shoreline Dr				
5. City, State, ZIP Code Leo, IN 46765	6. Party Affiliation <i>(if applicable)</i> Repulican			
CANDIDATE INFORMATION (For Candidate's Committees Only)				
7. Full Name of Candidate (Include any nickname.) Scott yoder	NAMES OF THE OWNER, SAME	3. Party Affiliation or If Independent Candidate		
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Leo-Cedarville Town Council	10. County Allen	County of Residence en		
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY	
1.1. Check one:  Pre-Primary Pre-Election Annual Nomination Other  First / Dishards Committee // in a 40 40 and 60 and 6 (60) Department of the committee of th		Check one:  Pre-Conve		
The Probability Committee Line 16, 16, and 20 marks of 17, in Calgarity Treasured (Winin Lett.) (17) days among statement of Organization.)				
12. Reporting Period ( $mm/dd/yy$ ):  From: $4-1-22$ Through: $10-21-22$		COLUMN A This Period	COLUMN B Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.		0.00		
14. Cash on hand and investments January 1, current year.		THE RELIGION OF THE PARTY OF TH	0.00	
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		Water Statement Birth		
15a. Itemized (Use Schedule A.)		0.		
15b. Unitemized		0.		
	TOTAL	0.		
	TOTAL		0.00	
EXPENDITURES		Market Street Street		
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)  17b. Unitemized		0.	Q 0.	
	TOTAL	0.	O-	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL			
19. Debts OWED BY the committee (Use Schedule D.)	IOIAL	6-00		
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

Title

Date (mm/dd/yy)

Date (mm/dd/yy)

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

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)

FOR OFFICE USE ONLY