

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**

TO 100				100			
FIL	E	N	П	M	В	F	R

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

	FILE NUMBER
TOTAL P	AGES IN ENTIRE CFA-4 REPORT
1	

1. Full Name of Committee (as on Statement of Organization) Check if this is a new of Committee that Ashles Figure 12.	name.	Consil						
COTATION TO THE THEORY	3. Committee	Leo Concell nmittee Telephone Number						
2. Acronym or Abbreviated Name (if any)	1	699-775						
(A)								
4. Mailing Address (Address where all campaign finance correspondence is received.) Check if this is a new address.								
5. City, State, ZIP Code	6. Party Affilia	tion (if applicable	9)					
Leo. IN 46765								
CANDIDATE INFORMATION (For Candidate's C	ommittees Oi	nly)						
7. Full Name of Candidate (Include any nickname.)	8. Party Affilia	Affiliation or If Independent Candidate						
Ashlee Jeen Findages	ublicso_							
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence							
Town council	es							
TYPE OF REPORT		CONVENT	TION CANDIDATES ONLY					
11. Check one:		Check one						
☐ Pre-Primary ☐ Pre-Election 🔯 Annual ☐ Nomination ☐ Other	_ =	onvention						
Final / Disbands Committee (Lines 18, 19, and 20 must be *0".) Utgoing Treasurer (Within ten (10) days amend State	ement of Organization.) Dost-0	Convention					
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B					
From: Through: 17/31 /2022		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.			0					
CONTRIBUTIONS AND RECEIPTS								
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)								
15a. Itemized (Use Schedule A.)		8	9					
15b. Unitemized		_ <i>&</i>	9					
15c. Add lines 15a and 15b in both columns.	OTAL	Ð	0					
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	OTAL	0	Ð					
EXPENDITURES								
(Note: These amounts include in-kind expenditures and loan repayments.)								
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		0	0					
17b. Unitemized		0	0					
17c. Add lines 17a and 17b in both columns.	OTAL	0	9					
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	0	A					
19. Debts OWED BY the committee (Use Schedule D.)		0						
20. Debts OWED TO the committee (Use Schedule E.)		8						
CERTIFICATION FOR OFFICE USE ONLY								
Signature of Treasurer Title CCCV Late	,	m/dd/yy)						

COMMITTEE INFORMATION

Date (mm/dd/yy)

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)

Signature of Candidate (if applicable)