

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

IS THIS AN AMENDMENT? Yes No

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

1. Full Name of Committee (as on Statement of Organization) 2. Acronym or Abbreviated Name (if any) 3. Committee Telephone Number 4. Mailing Address (Address where all campaign finance correspondence is received.) 4. Mailing Address (Address where all campaign finance correspondence is received.) 5. City, State, 2/F Code 6. Party Affiliation (if applicables) 7. Full Name of Candidate (include any priciname) 9. Office Sought (include statict number, if any, Not required for exploratory committee) 9. Office Sought (include statict number, if any, Not required for exploratory committee) 11. Check one: 11. Check one: 12. Reporting Period (inmidsty): 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments denurs); 1. current year. 15. Check in these amounts include in-land contributions and loans, as well as cash contributions.) 15a. Itemized (Use Schedule A) 15b. Unitemized 15b. Unitemized 15c. Add lines 15a and 15c in Column A and lines 14 and 15c in Column B. 17a. Itemized (Use Schedule A) 17b. Unitemized 17c. Radd lines 17a and 17b in both columns. 18c. Contributions. 19c. Debts OWED To the committee (Use Schedule E) CERTIFICATION 19c. Debts OWED To the committee (Use Schedule E) CERTIFICATION 19c. Debts OWED To the committee (Use Schedule E) CERTIFICATION 10c. Certification Contributions. 10c. Certification Contributions. 10c. Certification	COMMITTEE INFORMATION				
4. Mailing Address (Address where all cappaign finance correspondence is received.) Check if this is a new address. 5. City, State, ZIP Code CANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full Name of Candidate (Include any nickname.) 9. Office South (Include sizind number, if any. Not required for exploratory committee.) 9. Office South (Include sizind number, if any. Not required for exploratory committee.) 10. County of Residence 11. Check one: 11. Check one: 12. Reporting Period (InmiddUy): 12. Reporting Period (InmiddUy): 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments January 1, current year. 15. Itemized (Use Schedule A) 15. Itemized (Use Schedule A) 15. Itemized (Use Schedule B) (Public Question: use Schedule C.) 17. Add lines 13 and 15b in both columns. 17. Add lines 15a and 17b in both columns. 17. Add lines 17a and 17b in both columns. 18. Cash on hand and investments at close of this reporting period (Subbact 17c from 16 in both columns.) 18. Cash on hand and investments at close of this reporting period (Subbact 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule E.) CERTIFY THAT I HAVE \$\(\frac{1}{2} \) And COMPLETE. FOR OFFICE USE ONLY		•			
S. City, State, ZIP Code CANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full Name of Candidate (Include any incharame) S. Party Affiliation of If Independent Candidate S. Party Affiliation or If Independent Candidate The Section S. Party Affiliation or Independent Candidate S. Party Affiliation or If Independent Candidate Convention Through: S. Party Affiliation or Independent Candidate Convention Convention Convention Pre-Gendence Convention Pre-Gendence Convention Convention Convention Convention Pre-Gendence Convention Through: S. Party Affiliation or Independence Convention Co	2. Acronym or Abbreviated Name (if any) 3. (39			
S. City, State, ZIP Code CANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full Name of Candidate (Include any nickname,) 9. Office Sought (Include district number, if any, Not required for exploratory committee,) 9. Office Sought (Include district number, if any, Not required for exploratory committee) 10. County of Residence TYPE OF REPORT 11. Check one: Pre-Pirmany Pre-Bection Annual Nomination Other Check one: Pre-Pirmany Pre-Bection Annual Nomination Other Pre-Pirmany Pre-Bection Pre-Convention 22. Reporting Period (imm/dd/yy): From: Other Other Pre-Pirmany Pre-Bection Pre-Convention 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments annuary 1, current year: CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) 15a. Remized (Use Schedule A) 15b. Unitemized 15c. Add lines 13 and 15b in both columns. EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.) 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17a. Other include (Use Schedule B.) (Public Question: use Schedule C.) 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17a. Other include (Use Schedule B.) (Public Question: use Schedule C.) 17a. Other include (Use Schedule B.) (Public Question: use Schedule C.) 17a. Other include (Use Schedule B.) (Public Question: use Schedule C.) 17a. Other include (Use Schedule B.) (Public Question: use Schedule C.) 17a. Other include (Use Schedule B.) (Public Question: use Schedule C.) 17a. Other include (Use Schedule B.) (Public Question: use Schedule C.) 17a. Other include (Use Schedule B.) 17b. Unitemized 17c. Add lines 17a and 17b in both columns.		if this is	a new address.		
ANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full Name of Candidate (Include any nickname) 8. Party Affiliation or If Independent Candidate 10. County of Residence 10. County of Residence 11. Check one: Pre-Primary Pre-Becton Annual Nomination Other Check one: Pre-Primary Pre-Becton Annual Nomination Other Check one: Pre-Primary Pre-Becton Annual Nomination Other Check one: Pre-Convention Post-Convention 25. Final Disbards Committee (Lines 18, 19, and 20 must be '0') Outgoing Treasurer (Wittin ten (10) days amend Statement of Organization) 12. Reporting Period (municidy): Through:	5. City, State, ZIP Code 6.1				
9. Office Sought (Include district number, if any. Not required for exploratory committee.) 10. County of Residence TYPE of REPORT		nittees	Only)		
TYPE OF REPORT 11. Check one: Pre-Primary Pre-Election Annual Nomination Other Pre-Primary Pre-Election Annual Nomination Other Pre-Primary Pre-Election Annual Nomination Other Pre-Convention Post-Convention 12. Reporting Period (Imm/dd/yy): From: 1					
11. Check one: Pre-Primary Pre-Election Annual Nomination Other Pre-Primary Pre-Election Annual Nomination Other Pre-Primary Pre-Election Pre-Convention Pre-Convention Pre-Convention Post-Convention Post-Convent					
Pre-Primary Pre-Election Annual Nomination Other Pre-Convention Pre-Convention Pre-Convention Pre-Convention Pre-Convention Post-Convention Pre-Convention Post-Convention Post-Conven	TYPE OF REPORT		CONVEN	ITION CANDIDATES ONLY	
### Final / Disbands Committee (Lines 18, 19, and 20 must be '0') Outgoing Treasurer (Within ten (10) days amend Statement of Organization.) Post-Convention 12. Reporting Period (mm/dd/yy): From: 3			Check on	e:	
12. Reporting Period (mm/dd/yy): Through: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Pre-Primary Pre-Election Annual Nomination Other				
Through: \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		of Organizat	ion.)	-Convention	
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 cash contributions.) 15a. Itemized (Use Schedule A.) 15b. Unitemized 15c. Add lines 15a and 15b in both columns. 16. Add lines 15a and 15b in both columns. 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. 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. 18c. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19c. Debts OWED BY the committee (Use Schedule D.) 20c. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	12. Reporting Period (mm/dd/yy):				
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 cash contributions.) 15a. Itemized (Use Schedule A.) 15b. Unitemized 15c. Add lines 15a and 15b in both columns. 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. 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. SUBTOTAL 1799.80 1799.80 170		_			
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. 16. Add lines 15a and 15c in Column A and lines 14 and 15c in Column B. 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. SUBTOTAL 179 9 80 179 9 80 170. Add lines 17a and 17b in both columns. SUBTOTAL 179 9 80 179 9 80 170. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED To the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.					
15a. Itemized (Use Schedule A.) 15b. Unitemized 15c. Add lines 15a and 15b in both columns. 15c. Add lines 15a and 15b in both columns. 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. 17q. Soon 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. 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.					
15b. Unitemized 15c. Add lines 15a and 15b in both columns. 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. 1790.80 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. 17c. Add lines 17a and 17b in both columns. 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15c. Add lines 15a and 15b in both columns. 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. 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. 18c. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19c. Debts OWED BY the committee (Use Schedule D.) 20c. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINATED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	15a. Itemized (Use Schedule A.)		6939.50	6939.80	
15c. Add lines 15a and 15b in both columns. 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. 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. 18c. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19c. Debts OWED BY the committee (Use Schedule D.) 20c. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINATED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	15b. Unitemized	1	360.00	860	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. 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. 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	15c. Add lines 15a and 15b in both columns. SUBTOTA	1 7	190,80	7799.80	
(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. 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	1 7	790.80	7799.80	
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17b. Unitemized 17c. Add lines 17a and 17b in both columns. 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	EXPENDITURES				
17b. Unitemized 17c. Add lines 17a and 17b in both columns. 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	(Note: These amounts include in-kind expenditures and loan repayments.)				
17c. Add lines 17a and 17b in both columns. 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		1367.53	7367.53	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	17b. Unitemized				
19. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	17c. Add lines 17a and 17b in both columns.	AL 7	799.80	7799.80	
20. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION ICERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	AL	<u> </u>	φ	
CERTIFICATION I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	19. Debts OWED BY the committee (Use Schedule D.)		B		
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	20. Debts OWED TO the committee (Use Schedule E.)		\mathcal{G}		
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.	CEPTIFICATION			FOR OFFICE USE ONLY	
		CORRECT	AND COMPLETE.	TORGITION OF SIND	
10/30/2022	Signature of Treasurer Title		(mm/dd/yy)		
Signature of Candidate (if applicable) Date (mm/del/yy) 12/30/2022					
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)	files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate rep	ort as req	uired by the Indiana		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE NUMBER
D	
Page	of

	UTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS reet, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1 List 120 For	Boby-Somes of Thomspph CV of Wyne, IN 46845	Contributions: Direct In-Kind (describe) DOX HLYQU'S Other Receipts: Interest Loan Miscellaneous (specify)	\$190.24	\$190.24	08/25/2022 Just Hopkins
2 Hyr 421	Decupation (if required) Decupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	3 300	₫900	09/23/2022 2012/2022
3 Tr	acy Spanglor by Phaloa Mani Pha one, HI 95753 Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$250	\$250	09/22/2022 Just Hopkins
18 18	SSICL Hopkins Will Wallingham (It would be with the work of the w	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$1258.51	\$1258.51	10/14/2022 2014/2021/01
Fox	chad Wolff 29 Boll wood Dr 1 Wyne, IN 46815	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	02.081B	\$18000	19/1/2002 Jose Happins
Contributors		THIS PAGE OF SCHEDULE A	\$ 2078.75		
	TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY 11 15a of the Summary Sheet.	\$ ×		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

Page	of	
	FILE NUMBER	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
Learon Profis All Thin Engla Blud Huntertown, IN 46748	Contributions: Direct In-Kind (describe) Other Receipts;	\$300	\$300	10/16/1909
Contributor's Occupation (if required)	Interest Loan Miscellaneous (specify)			Jose Hopkins
1814 Lmville Pros	Contributions: Direct In-Kind (describe)	\$ 180	\$180	10/11/2022
FoA WM IN 46845 Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	•		Jass Hopkins
11819 ISING COADY	Contributions: Direct In-Kind (describe)	\$100	\$100	10/21/2002
Fort Wyns, IN Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$50	\$50	Joss Hopkin
New Short 10835 Smokey Ridge Plus	Contributions: Direct In-Kind (describe)	\$180	\$180	10/13/2022
Fort Wyne the 40818 Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			Jess Hopkins
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)		0.0 -0		
	THIS PAGE OF SCHEDULE A	\$ 6/0,00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	115a of the Summary Sheet.)	5-28-00 M		
		1LH		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER	
Page	of	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1718 Noble Kirsman? For Luyre, IN 40818	Contributions: Direct In-Kind (describe) Food for Furdy 150 Other Receipts: Interest Loan Miscellaneous (specify)	\$18.92	\$78.98	10/15/2022 Jose Hopki
2.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
3.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 78.92		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet.)	\$ 🗙		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
Page_	of			

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
	- 			
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
3.	Contributions:			
	Direct In-Kind (describe)			
	In-Kind (describe)			
	Other Bassinter			
	Other Receipts:			
	Miscellaneous (specify)			
4.	Contributions:			
	Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
5.	Contributions:			
	Direct			
	☐ tn-Kind (describe)			
	Other President			
	Other Receipts:			
	Miscellaneous (specify)			
		5550		
SUBTOTAL	THIS PAGE OF SCHEDULE A	s (7)		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	s 73		
(Enter total on ITEN	115a of the Summary Sheet.)	Ψ	S. A. S. Markey S. A. S.	with which the little



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or
print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the
reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All
cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on
this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political
action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds,
rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year,
MUST be itemized on this schedule fover \$200 if regular party committee).

	FILE NUMBER	
Page _	of	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
t.	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
2	Contributions:			
	In-Kind (describe)			
	Other Paralists			
	Other Receipts:			
	Miscellaneous (specify)			
3.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Miscellaneous (specify)			
4.	Contributions: Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
5.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
		• (4		
TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A	\$ 9		
(Enter total on ITEM	15a of the Summary Sheet.)	s φ		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions grandless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER	
Page _	of	

party commutes.			Page	от
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code) Triands of Bun ManDonyd 10457 Wash Look Rd FOA Wyra, IN 4688	TYPE OF CONTRIBUTION OR OTHER RECEIPT Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	COLUMN A AMOUNT THIS PERIOD 309.93	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY 10/5/2000
2 Francis of List 13018 Thomspole CV Fox hyre, IN 146845	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	263.03	∂63.03	09/83/2022 Just Hopkins
Jose Forest GIZOL Jose Forest GIZOL Fort Wyre, IN 46845	Contributions: Direct In-Kind (describe) to A messure right Other Receipts: Interest Loan Miscellaneous (specify)	S35.30	935,20	11/1/2002 Joss Hopkins
" Duran Voft for MC3 Fort Impre, IN 418415	Contributions: Direct In-Kind (describe) TOTAL MOSSIGN MON Other Receipts: Strategies Interest Loan Miscellaneous (specify)	365.05	355. <i>0</i> 5	11/10/2022. Jaes Hophais
5 Francis of Ban Mechanico 10657 Wast Cook Pol Fort Wyne, IN 46318	Contributions: Direct In-Kind (describe) NAS MULL Other Receipts: Interest Loan Miscellaneous (specify)	1200.65	1200.65	11/1/2022 Joss Hapkins
SUBTOTAL T	THIS PAGE OF SCHEDULE A	\$ 2983,85		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	ON THE LAST PAGE ONLY	\$ Ø		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
" French of Ben Muderld 10457 Wast Cook Rd Foot Wynk, Ith HVOID	Contributions: Direct In-Kind (describe) And round 5197 Part 5150 High Other Receipts: Interest Loan Miscellaneous (specify)	399.9A	329.93	10/28/2020 Joss Hopkin
HOSO WAS COOK RCI FOR LANDON THE FRANCES OF BON MENDON 10057 WAS COOK POL	Contributions: Direct	431.21	431.21	10/23/8000
Fronds of Bon MerDonly 10057. Was Cook Rd Fat Lupra, IN 4698	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	AT .15	27.15	1983/2000 Joss Haprin
4.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$ 988.28 \$ 6939.80		



(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

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 schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	<u></u>				
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code A Custom Puly Pickagine 3216 Congressional Purany For Myre, IN 46808	NOS sonod Bourd	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	894.50	994.50	09/Ward
Code A Corporation pulses and pulses	NICS School Bord	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	272.86	272.85	10/Vax
Code A Cardinage Lang broyding	Mrs school Band-	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	431.21	431.21	10/14/202
Code A VICTO POR SASOR SULTONO, NY SASOR	Door Hurge Pring. NACS SCHOOL BOARD	-Exi Direct ☐ In-Kind	196.66	196.66	9/24/202
9850 Pad Prach Suite A Paro, NV 89508	Door Hrude bung	Other	227.15	207.15	10/3/20
Salvo Congradional PLOKAIN	Sign Printing sta	Man Vind	431.21	431.21	10/28/2006
Brill unt Blordes LLC 1718 Noble Kiromer PL FOX Myro, IN 41081	Fundraisizedy 8 NALS Stroot Bourd	Direct In-Kind Peyment of Debt Returned Contribution Other Purpose:	18,98	78.98	10/13/200
	SUBTOTAL THIS PA	GE OF SCHEDULE B	\$2532.56		
TOTAL OF ALL F	PAGES OF SCHEDULE B ON TH	E LAST PAGE ONLY	s 6		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE NUMBER	
Page_	of	

				age or	
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
10/2000 Pack Duft 9350 Fack Pack Duft Paro, NV 89508	Door Hungars Nies School boxed	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	190.24	190.24	08/25/202
Say High Graphicele For Myre, IN 41866	Linga signs	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	32999	329.90	1015/2020
Earl Mile Grange III Earl Mile Grange III Earl Mile Grange III	NACS At Lunge School	Direct Directin-Kind Payment of Debt Returned Contribution Other Purpose:	329.92	329.99	10/28/202
Code A Right Stratglos LLC (16 17th Stratglos LLC Altoure, IA 50009	Tolt mossinge NACS AT Luop SO	Direct	835.20	රීජු.එ	11/1000
Rant Stratogies LLC Rant Stratogies LLC Lalle 17th Strat & Altoon2, IA 50009	1	Direct In Inc. Direct Inc. Direct Inc. Direct Inc. Direct Inc. Direct Inc. Inc. Direct Inc. Direct Inc. Direct Inc. Inc. Direct Inc. Dir	355.05	355,&	11/6/2022
V15/2 print 9290 Rd RCCK Sult Raro, NV 89508	Door Hrops NABES AT Lugasona	Direct In-Kind Payment of Debt Returned Contribution Other	227.15	227.15	10/23/202
MISON Print & Comphis 25441 North Shore Dr EIKHWT, IN 416514	Miller NACS At Lurop 501	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	1900-100	1200.65	11/7/2000
	SUBTOTAL THIS PAG	E OF SCHEDULE B	\$3418B		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE	Capacia Academia Capacia Capac	s Ø		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

Page _	of	
	FILL NOMBLE	
	FILE NUMBER	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Francis of Ben mula 10657 West Cook Rol Fort Myre, IN 46818	red Contribution NACS SCLOOL DOOR	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	108.37	108.37	12/19/202
Code O HOPKING LA LIBYER CH		Direct In-Kind	1958.51	 258 .5	10/14/202
Code	At CVOSE	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG		\$ \ 3bbe.88		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE		\$73\07.53		



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 schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

	FILE NUMBER	
Page _	of	_

			Page _	of	
Enter Text of Public Question.	PUBLIC QUESTIO	N INFORMATION			
Like for all able gassion.					
Type of Question: Statewide	Local				
Position: Supported Dppo	osed				
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code		☐ Direct ☐ In-Kind	3,500		
		Payment of Debt Returned Contribution			
		Other Purpose:			6
Code		Direct In-Kind			
		Payment of Debt Returned Contribution			
		Other			
		T dipodo.			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
		Returned Contribution			
		OtherPurpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
		Returned Contribution Other			
		Purpose:			
Code		☐ Direct ☐ In-Kind			
Code		Payment of Debt			
		Other			
		Purpose:			
Code		Direct In-Kind	~		
		Payment of Debt Returned Contribution			
		Other			
TOTAL OF ALL DAG	SUBTOTAL THIS PAG		\$ Ø		
TOTAL OF ALL PAG	GES OF SCHEDULE C ON THE Enter total on ITEM 17a of to		s 9		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, <u>regardless of the amount</u>, **OWED BY** the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

	FILE NUMBER	
Page	of	

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	(mm/dd/yy)	YEAR-TO-DATE	PERIOD
LENDER'S OCCUPATION					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION					
					J.
LENDER'S OCCUPATION					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION					
LENDER'S OCCUPATION					
SUBTOTAL THIS PAGE OF SCHEDULE D				\$ (2)	
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY				7	
(Enter total on ITEM 19 of the Summary Sheet.)					\$ 50



(CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

Page	of	
	FILE NUMBER	

BORROWER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	CO-SIGNER'S NAME AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	ORIGINAL AMOUNT	DATE DEBT INCURRED (mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
SUBTOTAL THIS PAGE OF SCHEDULE E					\$ 0
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summary Sheet.)				50	