

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

(CFA-4) Summary Sheet

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.

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT?	Yes	ޙNo
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	COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization Notes Torgan for Allen Cou	· / // -				
2. Acronym or Abbreviated Name (if any)	0	3. Committee Tel	ephone Number	3	
4. Mailing Address (Address where all campaign finance co	rrespondence is received.) 📈	Check if this is a new	7 <u>24</u>	ED ELECTION BO	
5. City, State, ZIP Code Ft. Wayne IN 4682	35	6. Party Affiliation	(if applicable)	The product of the second second	
	ORMATION (For Candidate's (Committees Only,)		
7. Full Name of Candidate (Include any nickname.)	u	8. Party Affiliation	or If Independer	nt Candidate	
9. Office Sought (Include district number, if any. Notrequir	ed for exploratory committee.)	10. County of Re	llen		
TYPE OF I	REPORT		CONVENTIO	N CANDIDATES ONLY	
11. Check one: Pre-Primary Pre-Election Annual Nomination	<u></u>		Check one:	vention	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".)		atement of Organization.)	Post-Cor		
12. Reporting Period (mm/dd/yy):	1 .	CC	LUMN A	COLUMN B	
** \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	gh: 1231 2022	Th	is Period	Year to Date	
13. Cash on hand and investments at the beginning of this		50	.04		
14. Cash on hand and investments January 1, current year.				50.04	
CONTRIBUTIONS AND RECEIPTS					
(Note: these amounts include in-kind contributions and loan	s, as well as cash contributions.)				
15a. Itemized (Use Schedule A.)	Carr.	0		0	
15b. Unitemized				<u> </u>	
15c. Add lines 15a and 15b in both columns.	SUB	TOTAL ()		0	
16. Add lines 13 and 15c in Column A and lines 14 and 15c	in Column B.	TOTAL 50	.0¹-{	50.04	
EXPENDITUR	ES				
(Note: These amounts include in-kind expenditures and load	n repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Sch	edule C.))	0	
17b. Unitemized		5	0.04	50.04	
17c. Add lines 17a and 17b in both columns.	SUE	STOTAL 50	9,04	50,04	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL (<u> </u>		
19. Debts OWED BY the committee (Use Schedule D.)					
20. Debts OWED TO the committee (Use Schedule E.))		
CERTIFICATION FOR OFFICE USE ONLY					
I CERTIFY THAT LHAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.					
Signature of Treaturer	Title	Date (mm/	ì		

CEN	HEIGATION			
I CERTIFY THAT LHAVE EXAMINED THIS STATEMENT. TO THE BES	T OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CO	ORRECT AND COMPLETE.		
Signature of Treasurer	Title	Date (mm/dd/yy) 01 18 7073		
Signature of Candidate (Mapplicable)		Date (mm/dd/yy)		
les les		01/18/2023		
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 p	erson who fails to file a complete or accurate repor	t 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)		