

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

IS THIS AN AMENDMENT?

Signature of Treasurer

Signature of Candidate (if applicable)

☐ Yes

(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) Check if this is a new name.			
2. Acronym or Abbreviated Name (if any) 3. Comr		ommittee Telephone Number	
		0) 409-6589	
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 Affiliation (if applicable)		
YODER, IN. 46'199	KEPUBLICAN		
CANDIDATE INFORMATION (For Candidate's Committees Only)			
7. Full Name of Candidate (Include any nickname.)	Party Affiliation or If Independent Candidate		
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence		
LAFAY ETTE TOWNSHIP TRUSTEE ALLEN			
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other Pre-Convention			rention
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend Statement of Organization.)			
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: 10 13 2022 Through: 12 31 2022	ua.	This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		Ø	
14. Cash on hand and investments January 1, current year.			Ø
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		8	0
15b. Unitemized		0	0
15c. Add lines 15a and 15b in both columns.	TOTAL	0	is .
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	0	8
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		9	Ø
17c. Add lines 17a and 17b in both columns.	BTOTAL	W.	Ø
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	B	Ø
19. Debts OWED BY the committee (Use Schedule D.)		B	
20. Debts OWED TO the committee (Use Schedule E.)		B	
CERTIFICATION			OD OFFICE LISE ONLY

Date (mm/dd/yy)

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)

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.