

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

Yes X No

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

12

COMMITTEE INFORMATIO	N			
1. Full Name of Committee (as on Statement of Organization)				
2. Acronym or Abbreviated Name (if any)	3. Com	nmittee Telephone	Number	
N/A	(260) 403-0915		
4. Mailing Address (Address where all campaign finance correspondence is received.) 7734 Butterstone Ct	Check if the	nis is a new addres	3S.	
5. City, State, ZIP Code Fort Wayne, IN 46804	6. Part	y Affiliation <i>(if appl</i>		YSIGA
CANDIDATE INFORMATION (For Candidate's	s Committe	,		
7. Full Name of Candidate (Include any nickname.) Lucas (Luke) Clayton Fries		y Affiliation or If Ind	dependent	Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Fort Wayne City Common Council At-Large	10. Co	unty of Residence		
TYPE OF REPORT		CON	VENTION	CANDIDATES ONLY
11. Check one: Pre-Primary Pre-Election Annual Nomination Other			ck one: Pre-Conve	ntion
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend	Statement of Org	ganization.)	Post-Conve	ention
12. Reporting Period (mm/dd/yy):		COLUMN	A	COLUMN B
From: 1/1/2023 Through: 4/7/2023		This Perio	d	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.	,			\$0.00
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		40.050		A Commence
15a. Itemized (Use Schedule A.)		\$9,350		\$9,350
15b. Unitemized		\$40.20		\$40.20
	JBTOTAL	\$9,390.	THE REAL PROPERTY AND PERSONS ASSESSED.	\$9,390.20
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	\$9,390.2	20	\$9,390.20
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		\$4,202.1	6	\$4,202.16
17b. Unitemized		\$49.31		\$49.31
	UBTOTAL	\$4,251.4	A STATE OF THE PARTY OF THE PAR	\$4,251.47
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	\$5,138.7	3	\$5,138.73
19. Debts OWED BY the committee (Use Schedule D.)		\$0.00		
20. Debts OWED TO the committee (Use Schedule E.)		\$0.00		
CERTIFICATION I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT I	S TRUE, CORI	RECT AND COMPLET		R OFFICE USE ONLY

CERTIFICATION					
I CERTIFY THAT I HAVE EXAMINED THIS STATE HENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE,					
Signature of Treasurer Title Treasurer Date (mm/dd/yy) OH 114 123					
Signature of Candidate (if applicable) Date (mm/dd/yy)					
Luna C. Irun					
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)					



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					
Page _	1	of	2		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
 Gregory Peck 500 Countryside Dr. Apt27 	Contributions: Direct In-Kind (describe)	\$300	\$300	3/29/2023
Ossian, IN 46777	Other Receipts: Interest Loan Miscellaneous (specify)		7300	Luke Fries
Contributor's Occupation (if required)	Contributions:			
John Hawkins 12105 Waycliff Court Fort Wayne, IN 46845	☐ In-Kind (describe)			3/29/2023
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$150	\$150	Luke Fries
3. Stephen and Glenna Jehl 7120 Signature Run Fort Wayne, IN 46835	Contributions: Direct In-Kind (describe)	,\$100	\$100	3/13/2023
Tore wayne, in 40033	Other Receipts: Interest Loan Miscellaneous (specify)			Luke Fries
Contributor's Occupation (if required)	Manifestration and American and			
Michael Vanover 4620 E 900 S Keystone, IN 46759	Contributions: Direct In-Kind (describe)	\$3,500	\$3,500	2/20/2023
included in the second of the	Other Receipts: Interest Loan Miscellaneous (specify)			Luke Fries
Contributor's Occupation (if required)				
Kenneth and Candice Fries 4627 Hollopeter Rd	Contributions: Direct In-Kind (describe)	\$1,000	\$1,000	1/19/2023
Leo, IN 46765	Other Receipts: Interest Loan Miscellaneous (specify)			Luke Fries
Contributor's Occupation (if required)	THIS PAGE OF SCHEDULE A	\$ 5.050		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$ 5,050 \$ 9,350		
(Enter total on ITEI	4 7,550			



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.

	FILI	Е NUMBE	R	
Page _	2	of	2	

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
1. Tom and Beverly Goff 12219 Bending Oaks Ct Fort Wayne, IN 46845	Contributions: Direct In-Kind (describe)	\$200		
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			Luke Fries
Mike and Rise Taylor 2121 W 900 N Markle, IN 46770	Contributions: Direct In-Kind (describe)	\$100	\$100	2/11/2023
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	7.00	4.00	Luke Fries
3. Bill Bean 7108 Covington Road	Contributions: Direct In-Kind (describe)	\$4,000	\$4,000	3/7/2023
Fort Wayne, IN46804 Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			Luke Fries
4.	Contributions: Direct In-Kind (describe)			
Contributaria Convention (if conviced)	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe)			
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL 1	\$ 4,300			
TOTAL OF ALL PAGES OF SCHEDULE A	\$ 9,350			

C C

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

(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				
		20100		
Page		of		-

FULL M	OR'S FULL NAME AND	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.	er, city, state, ZIP code)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	PERIOD	YEAR-TO-DATE	
2.	001S 001S	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)		10 m 28 6 6 W 100 6 W	
3.	000.83	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			\$ ()		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)			\$ 🔿		



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

Indiana

(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 (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
1.	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
"	Direct			
	In-Kind (describe)			
	Other Receipts:			
,	Interest Loan			
	Miscellaneous (specify)			
2.	Contributions:			
	Direct			
•	In-Kind (describe)			
	Brandonovanovanovanovanovanovanovanovanovanov			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
	Well-well-workenderstanderstationstations			
3.	Contributions:			
	Direct	D ,		
	In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			
	L Wiscellaneous (specify)			
4.	Contributions:			
	In-Kind (describe)			
	III-Kilid (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
	Technological Property Committee Control			
5.	Contributions:			
	Direct			
	In-Kind (describe)			
	AND THE PROPERTY OF THE PROPER			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$ ()		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	. 0		
(Enter total on ITEM	\$ ()			



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 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 (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)	SK STILL KESLIN	PERIOD	YEAR-TO-DATE	RECEIVED BY	
1.	Contributions:				
	Direct				
	In-Kind (describe)				
	Other Receipts: Interest Loan				
	Miscellaneous (specify)				
2	Contributions:				
2.	Direct				
	In-Kind (describe)				
	Experimental designation of the Control of the Cont				
	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	0.4		,	
	Miscellaneous (specify)				
	iniconancoda (apocny)				
		1			
	THIS PAGE OF SCHEDULE A	\$ 0			
TOTAL OF ALL PAGES OF SCHEDULE , (Enter total on ITEM	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$ 0			



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 N	NUMB	ER	
Page _		_ of _		

	BUTOR'S FULL LL MAILING AD		TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
	umber, city, sta			PERIOD	YEAR-TO-DATE	RECEIVED BY
1.			Contributions: Direct			
3.072023			In-Kind (describe)			
			And an international property and a second a		80883	
			Other Receipts:			
			☐ Interest ☐ Loan ☐ Miscellaneous (specify)			A Comment
			Li Missonarious (sposity)		gmigssbs/	Custom Poly
2.			Contributions:			
			Direct		80838 1	E. STRYCKY INTE
			In-Kind (describe)			A
			Other Receipts:	(1) Sign P(1)		
372872023			Interest Loan			emann i Alf Ci
			Miscellaneous (specify)		608344	Fort Wavee
			0.17.5			
3.			Contributions: Direct	,		A L
2			In-Kind (describe)			
27/10/12023			Company of the Compan		100	
			Other Receipts: .		75000	
			Miscellaneous (specify)			A L
			Not a constitution of the			
4.			Contributions:			
			☐ Direct☐ In-Kind (describe)		400000	S. Saryal Margarith
			Other Receipts:			
44.02023			☐ Interest ☐ Loan ☐ Miscellaneous (specify)			29/807
C2027178			Milosoficarioods (eposity)		30	*430 fillinois f
5.			Contributions:			
			Direct			
			In-Kind (describe)			
372972023			Other Receipts:			
			Interest Loan			
			Miscellaneous (specify)			
18.00		ALIBERT				
	POTAL OF ALL		TAL THIS PAGE OF SCHEDULE A	\$ ()		
	I O I ALL		JLE A ON THE LAST PAGE ONLY ITEM 15a of the Summary Sheet.)	\$ 0		

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

State Form

(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					
				30	
Page _	1	of	2		

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION TYPE OF EXPENDITURE		COLUMN A	COLUMN B	DATE OF
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
Custom Poly Packaging 3216 Congressional Pkwy Fort Wayne, IN 46808	Sign Printing	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Yard Sign Printing	\$272.85	\$272.85	3/2/2023
Custom Poly Packaging 3216 Congressional Pkwy Fort Wayne, IN 46808	Sign Printing		\$1,738.75	\$2011.60	3/13/2023
Custom Poly Packaging 3216 Congressional Pkwy Fort Wayne, IN 46808	Sign Printing		\$1,323.59	\$3,335.19	3/28/2023
Lowe's 4430 Illinois Rd Fort Wayne, IN 46804		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Sign assembly parts	\$206.77	\$206.77	3/26/2023
Lowe's 4430 Illinois Rd Fort Wayne, IN 46804		□ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other □ Purpose: Sign assembly parts	\$25.64	\$232.41	4/7/2023
Lowe's 4430 Illinois Rd Fort Wayne, IN 46804		□ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other	\$24.31	\$256.72	4/1/2023
Code C Nathan Hartman for City Counc	il and the second secon	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$100	\$100	3/29/2023
	SUBTOTAL THIS PAGE	GE OF SCHEDULE B	\$ 3,691.91		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON TH	E LAST PAGE ONLY	\$4,202.16		



State Form

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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.

FILE NUMBER					
Page _	2	of	2		

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)
Allen County GOP 135 W Main St. Fort Wayne, IN 46802		□ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other □ Purpose:	\$250	\$250	2/16/2023
Code C Allen County GOP 135 W Main St. Fort WAyne, IN 46802			\$260.25	\$510.25	4/7/2023
Code	1694 CJ 1665 CJ 1675 C	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:			1000
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	E OF SCHEDULE B	\$ 510.25		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the	LAST PAGE ONLY	\$ 4,202.16		



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					
	(
COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)				
	COP N 45802	Bon Causti 35 W Main on Wayne,				
		,				

Enter Text of Public Question.							
Type of Question: Statewide Local Position: Supported Opposed							
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 Payment of Debt Returned Contribution Other Purpose:		905 3 3 3 4 4 5 8 8			
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	Ideal comment of the	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:					
Code	C Programme La Gastan C C Canada are Commission C C Canada C C Canada	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:					
		GE OF SCHEDULE C	\$ ()				
	ES OF SCHEDULE C ON TH (Enter total on ITEM 17a of		\$ 0				

PUBLIC QUESTION INFORMATION

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

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

Indiana

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 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
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Page _	of

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED (mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
LENDER'S OCCUPATION:					
IFNIPERIO COCUPATION					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					4
EENDER'S OCCUPATION.		,			
		,			
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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 46/06 (P.15. / 5.10)

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

(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, <u>regardless of the amount</u>, **OWED TO** the committee during the reporting period. Include all amounts the committee has loaned to others.

FILE NUMBER							
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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	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
		NATURE OF DEBT	(mm/dd/yy)	YEAR-TO-DATE	PERIOD
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SUBTOTAL THIS PAGE OF SCHEDULE E					
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(Enter total on ITEM 20 of the Summary Sheet.)					