



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

FILE NUMBER

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.

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT? Yes No

COMMITTEE INFORMATION

| | | |
|--|--|--------------------------------------|
| 1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name. <i>Our Community Future</i> | | 3. Committee Telephone Number () |
| 2. Acronym or Abbreviated Name (if any) | | |
| 4. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address. <i>4326 State Street, INDIANAPOLIS, IN</i> | | |
| 5. City, State, ZIP Code <i>New Haven IN 46774</i> | | 6. Party Affiliation (if applicable) |

CANDIDATE INFORMATION (For Candidate's Committees Only)

| | |
|--|--|
| 7. Full Name of Candidate (Include any nickname.) <i>Anthony Taylor</i> | 8. Party Affiliation or If Independent Candidate |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.) <i>New County Trustee Board Adams</i> | 10. County of Residence <i>Allen</i> |

TYPE OF REPORT

11. Check one:

Pre-Primary Pre-Election Annual Nomination Other

Final / Disbands Committee (Lines 18, 19, and 20 must be "0") Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)

CONVENTION CANDIDATES ONLY

Check one:

Pre-Convention

Post-Convention

| | | |
|---|-------------------------|--------------------------|
| 12. Reporting Period (mm/dd/yy): From: Through: | COLUMN A This Period | COLUMN B Year to Date |
| 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. SUBTOTAL | | |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL | <i>0</i> | <i>0</i> |

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 | | |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) TOTAL | <i>0</i> | <i>0</i> |
| 19. Debts OWED BY the committee (Use Schedule D.) | | |
| 20. Debts OWED TO the committee (Use Schedule E.) | | |

CERTIFICATION

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

| | | |
|--|-------|--------------------------------------|
| Signature of Treasurer <i>[Signature]</i> | Title | Date (mm/dd/yy) |
| Signature of Candidate (if applicable) <i>[Signature]</i> | | Date (mm/dd/yy) <i>04/21/2023</i> |

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)

FOR OFFICE USE ONLY

FILED ELECTION BOARD
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