



**SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT BY  
A CANDIDATE'S COMMITTEE  
(\$1,000 CONTRIBUTIONS OR MORE)**

**(CFA-11)**

State Form 48492 (R6 / 5-19)  
Indiana Election Division (IC 3-9-5-20.1; 3-9-5-22)

**INSTRUCTIONS:** Only candidates receiving a "large contribution" are required to file this report. 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

<b>FILE NUMBER</b>
<b>TOTAL PAGES IN ENTIRE CFA-11 REPORT</b>
1

**COMMITTEE INFORMATION**

1. Full Name of Candidate (Include any nickname.) <input type="checkbox"/> Check if this is a new name. <b>THOMAS C. HENRY</b>			2. Committee Telephone Number <b>( 260 ) 739 - 7781</b>		
3. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address. <b>110 WEST BERRY STREET, SUITE 2202</b>					
4. City <b>FORT WAYNE</b>		State <b>IN</b>	ZIP Code <b>46802</b>	5. Party Affiliation or If Independent Candidate <b>DEMOCRAT</b>	
6. Office Sought (Include district number, if any. Not required for exploratory committee.) <b>MAYOR OF FORT WAYNE, INDIANA</b>				7. County of Residence <b>ALLEN</b>	
8. Reporting Period (mm/dd/yy): From: <b>10/14/2023</b> Through: <b>11/05/2023</b>					

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)		TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED (mm/dd/yy) RECEIVED BY
Classification 1.	<b>INDIANA REALTORS POLITICAL 143 W. MARKET ST, SUITE 100 INDIANAPOLIS, INDIANA 46204</b>	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	<b>\$5,000.00</b>	<b>10/27/23</b> MARK ANDORFER
Classification 2.	Contributor's Occupation (if applicable)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)		MARK ANDORFER
Classification 3.	Contributor's Occupation (if applicable)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)		MARK ANDORFER

**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>Mark Andorfer</i>	Title <b>TREASURER</b>	Date (mm/dd/yy) <b>10/27/23</b>
Signature of Candidate (if applicable) <i>Thomas C. Henry</i>		Date (mm/dd/yy) <b>10/27/23</b>

**Warning:** Any information contained in this report may not be copied, or 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, and IC 3-9-4-18)

**FOR OFFICE USE ONLY**

FILED ELECTION BOARD  
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