



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

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

**(CFA-11)**

**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.

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

IS THIS AN AMENDMENT?  Yes  No

**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>					

For classification, enter INDV for individual; PAC for political action committee; CORP for corporation; LAB for labor organization; OTHER for all entries which are not one of the above categories.

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 <b>PAC</b>	1. <b>SHEET METAL WORKERS LOCAL 20 P.O. BOX 20530 INDIANAPOLIS, INDIANA 46220</b> 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) _____	<b>\$1,000.00</b>	<b>10/18/23</b> <b>MARK ANDORFER</b>
Classification <b>INDV</b>	2. <b>RICHARD D. WATERFIELD 7221 ENGLE ROAD SUITE 250 FORT WAYNE, INDIANA 46804</b> 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) _____	<b>\$1,000.00</b>	<b>10/19/23</b> <b>MARK ANDORFER</b>
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) _____		<b>MARK ANDORFER</b>

**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 	Title <b>TREASURER</b>	Date (mm/dd/yy) <b>10/19/23</b>
Signature of Candidate (if applicable) 		Date (mm/dd/yy) <b>10/19/23</b>

**FOR OFFICE USE ONLY**

FILED ELECTION BOARD  
23 OCT 19 AM 8:57

**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, and IC 3-9-4-18)