

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

State Form 48492 (R4 / 11-05) Indiana Election Commission (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.

(CFA-11)

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	MMITTEE INFORMATI					
1. Full Name of Candidate (include any nickname)						
Audrey Rose Davis	<u> </u>					
3. Mailing Address (address where all campaign finance correspondence is received) L. Check if this is a new address						
4130 N. Washington						
14. CIV	ZIP Code	5. Party Aff	5. Party Affiliation or If Independent Candidate			
Fort Wayne IN	46804 De		mocratic			
6. Office Sought (include district number, if any, Not required for explo		7. County of Residence				
8. Reporting Period:		Allyw				
8. Reporting Period:						
From: 10/14/2023 Through: 11-	7-2023		•			
For classification, enter INDV for individual; PAC for political action committee: CORP		anization; NONE	for all entries which are not one of the above	e categories.		
CONTRIBUTOR'S FULL NAME AND OCCUPATION	CONTRIBUTOR'S FULL NAME AND OCCUPATION		COLUMN A	DATE RECEIVED		
FULL MAILING ADDRESS	TYPE OF CONTR OR OTHER RE		AMOUNT OF			
(street, number, city, state, ZIP code) Classification 1.	0		CONTRIBUTION	RECEIVED BY		
	Contributions:					
INO.	☐ In-Kind (describe)					
John Shoaff				1 . 1 . 1		
3604 5. Weslington R.	Other Receipts:		\$ 1,000	10/30/23		
3604 5. 45511257000	☐ Interest ☐ Loan			1		
Fort Woyne, ± V 4680	☐ Misc (specify)			AD		
Contributor's Occupation (if applicable)	<u> </u>					
Classification 2.	Contributions:					
IND. Robert Shorff	Direct					
IND. Robert Short 2551 West brook Do Fort Wayne IN	☐ In-Kind (describe)			11/2-1-2		
2531 250			\$ 1,000	10/30/23		
Fort wayne 4,800	Other Receipts:		*			
4,80	Linterest Li Loan		ļ	AD		
	☐ Misc (specify)					
Contributor's Occupation (if applicable)						
Classification 3.	Contributions:					
	☐ Direct☐ In-Kind (describe)					
	III Title (deconse)					
	0.1. 5. 4.					
	Other Receipts: ☐ Interest ☐ Loan					
	☐ Misc (specify)					
Contributor's Occupation (if applicable)						
CERTIFICATIO	nn -		EOP OFFIC	E LISE ONLY		
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		Date (MM-DD-	VVA			
Signature of Treasurer Title Date (M)			~(1) 			
Signature of flandidate (if applicable)		THE AND TO SELECTION DOWN				
Signature of Gandidate (if applicable) Treasure 11/6/20218FD LECTION BUARD Date (MM-DD-YY) 11/6/2023 11/6/2023						
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 Class D 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)						
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