

### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R17 / 8-23) Indiana Election Division (IC 3-9-5-14)

assistance in completing this form, see instructions on the reverse side.

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For

IS THIS AN AMENDMENT?

Signature of Candidate (if applicable)

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#### (CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

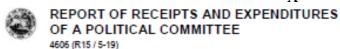
3

COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization)  David P. Devine for County Surveyor				
Acronym or Abbreviated Name (if any)	3. Co	mmittee Telep	hone Numb	per
none	≟	) none	none	
Mailing Address (Address where all campaign finance correspondence is received.)     112 Hampshire Drive	heck if	this is a new	address.	
5. City, State, ZIP Code	6. Par	rty Affiliation (	if applicable	)
Fort Wayne, Indiana 46815		Republ	ican	
CANDIDATE INFORMATION (For Candidate's Co	ommit	tees Only)		
7. Full Name of Candidate (Include any nickname.)	8. Par	rty Affiliation o	r If Indepen	dent Candidate
David P Devine		Republ	ican	
<ol> <li>Office Sought (Include district number, if any. Not required for exploratory committee.)</li> </ol>	10. C	ounty of Resid	dence	
County Surveyor		Allen		
TYPE OF REPORT			CONVENT	TION CANDIDATES ONLY
11. Check one:			Check one	5.
Pre-Primary Pre-Election Annual Nomination Other			Pre-C	onvention
Final / Disbands Committee (Lines 18, 19, and 20 must be 101.) Utgoing Treasurer (Within ten (10) days amend State	emant of C	Organization.)	Post-0	Convention
12. Reporting Period (mm/dd/yy):		COL	UMN A	COLUMN B
From: 04/12/2024 Through: 12/31/2024		This	Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		\$811.3	0	
14. Cash on hand and investments January 1, current year.				\$811.27
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (Use Schedule A.)		\$0.00		\$0.00
15b. Uniternized		\$0.12		\$0.15
15c. Add lines 15a and 15b in both columns. SUBT	OTAL	\$0.12		\$0.15
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	\$811.4	2	\$811.42
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		\$155.7	5	\$155.75
17b. Uniternized		\$0.00		\$0.00
17c. Add lines 17a and 17b in both columns. SUB1	TOTAL	\$155.7	5	\$155.75
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	. \$655.6	7	\$655.67
19. Debts OWED BY the committee (Use Schedule D.)		\$1363.	00	
20. Debts OWED TO the committee (Use Schedule E.)		\$0.00		
CERTIFICATION				FOR OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TR	RUE CO	RRECT AND CO	OMPLETE	TOR OFFICE ODE ONLY
Signature of Treasurer Title	100,00	Date (mm/do		
Paril Devine Treasurer		01/08/2		
CONTRACT TO THE PARTY OF THE PA				

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 fellony. (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)

Date (mm/dd/yy) 01/08/2025



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	
	2	3	
Page_		of	

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)
IN Republican Party 101 W Ohio Street, Suite 220 Indianapolis, IN 46204	0	X Direct   In-Kind   Payment of Debt   Returned Contribution   Other Purpose:	\$155.75	\$155.75	05/15/2024
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		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:			
TOTAL OF ALL PA	SUBTOTAL THIS PAG	LAST PAGE ONLY	\$ \$155.75 \$ \$155.75		
	(Enter total on ITEM 17a of t	ne Summary Sheet.)	_		



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# (CFA-4 SCHEDULE D) DEBTS OWED BY 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, 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			
	3	3	
Page		of	

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	(mm/dd/yy)	YEAR-TO-DATE	PERIOD
David P. Devine		\$220.00	04/01/20	\$0.00	\$220.00
4112 Hampshire Drive		Ψ220.00	04/01/20	ψ0.00	Ψ220.00
Fort Wayne, Indiana 46815		loan to campaign			
1 of wayne, marana 40019		committee			
LENGER ECCEUPATION: Surveyor, engineer		Committee			
Surveyor, engineer					
David P. Devine		\$720.00	04/24/20	\$0.00	\$940.00
4112 Hampshire Drive		Ψ720.00	0 1/2 1/20	ψ0.00	ψ2 10.00
Fort Wayne, Indiana 46815		loan to campaign			
LENDERS OCCUPATION: Surveyor, engineer		committee			
David P. Devine		\$423.00	05/05/20	\$0.00	\$1363.00
4112 Hampshire Drive		Ψ125.00	03/03/20	Ψ0.00	Ψ1303.00
Trampomie Brive					
Fort Wayne, Indiana 46815		loan to campaign			
·   ·		committee			
End surveyor, engineer		Committee			
LENGER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S COCUPATION:					
LENGER'S CICCURATION:					
		SUBTOTA	L THIS PAGE O	F SCHEDULE D	\$ 1363.00
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY					10 0
	TOTAL OF ALL	(Enter total on I			\$ 1363.00