

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14) (CFA-4)
Summary Sheet

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TOTAL PAGES IN ENTIRE CEA-4 REPORT

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.

IS THIS AN AMENDMENT? Yes No						
COMMITTEE INFORMATION						
1. Full Name of Committee (as on Statement of Organization) Check if this is a new n	4	Committee				
2. Acronym or Abbreviated Name (if any)		mmittee Telephone Number				
	10	12,341-1426	2			
PO BOX 1723	neck if t	this is a new address				
5. City, State, ZIP Code COLUMN OUS TN 47202	6.Pa	rty Affiliation (if applicable)				
COMMITTERS THE	K	Edublican				
CANDIDATE INFORMATION (For Candidate's Co	ommit	ttees Only)				
7. Full Name of Candidate (include any nickname)	8. Pai	rty Affiliation or If Independe	nt Candidate			
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. C	ounty of Residence				
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY			
11. Check one:	•••••	Check one:				
Pre-Primary Pre-Election Annual Nomination Other		Pre-Con	vention			
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Utgoing Treasurer (within 10 days amend Statement of Committee (lines 18, 19, and 20 must be "0")	Organizat	ion) Dost-Col	nvention -			
12. Reporting Period:		COLUMN A	COLUMN B			
From: $01/61/2017$ Through: $12/31/2017$		This Period	Year to Date			
13. Cash on hand and investments at the beginning of this reporting period.		1442,50				
14. Cash on hand and investments January 1, current year.			1442.50			
CONTRIBUTIONS AND RECEIPTS		<u>. </u>				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)						
15a. Itemized (use Schedule A)		11,690.00	11,690.00			
15b. Unitemized		8867.00	8,867.00			
15c. Add lines 15a and 15b in both columns SUBTO	TAL	20,557.00	20,557.00			
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	DTAL	21,999.50	21,999.50			
EXPENDITURES		_				
(Note: These amounts include in-kind expenditures and loan repayments.)						
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		14,640.88	14,640.88			
17b. Unitemized		665.80	665.80			
17c. Add lines 17a and 17b in both columns SUBT	OTAL	15,306.68	15,306.68			
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	6.692.82	6.692.82			
19. Debts OWED BY the committee (use Schedule D)	0					
20. Debts OWED TO the committee (use Schedule E)						
CERTIFICATION		induces	OR-OFFICE-USE-ONLY			
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TR	UE, COI	RRECT AND COMPLETED	CETVE			
Signature of Treasurer Compared to the contract of the cont	1	Date //7/2018	IAM 1 17 2010			

CERTIFICATION	FOR OFFICE USE ONLY	
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AN	D BELIEF IT IS TRUE, CORRECT AND COMPLETED	U
Signature of Treasurer Signature of Candidate (if applicable) Title Veasure	Date JAN 1 7 2010	
WARNING: Any information contained in this report may not be copied for sale or used for any confiles a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a cc Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil	implete or accurate report as required by the Indiana	es nenovo



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be Itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER					
Page		of	5		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
Gregory & Denis Pence	Contributions: Direct In-Kind (describe)	\$500.00	\$500.00	2/17/17
482 Mutz Dr. Columbus, IN 47201	Other Receipts: Interest Loan Misc. (specify)			LW
2. Matthew Miller 4015 S 1100 E	Contributions: Direct In-Kind (describe)	1250	F\$50	2/17/17
Hartsville, IN 47244	Other Receipts: Interest Loan Misc. (specify)			LW
Contributor's Occupation (if required) 3. Milo & Diane Smith 632 3rd St. Columbus, IN 47201	Contributions: Contributions: In-Kind (describe)	\$ (000.00	\$ 1000	2125/17
Columbus, IN 47701 Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)			ιω
1234 Lafaythe Ave Columbus IN 47201	Contributions:	\$500°	\$500	3/7/17
Columbus IN 47001 Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)		·	LW
5 Laura De Domenic 411 7th 8t. Columbus IN 47801	Contributions: Direct In-Kind (describe)	250	250	<i>8</i> 103117
Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)			lw
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 2500.00		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

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FILE NUMBER					
	-				
Page _	2	of	5		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1. Carl & Deborah Lienhoop	Contributions:	500	500	4/11/17
20434 E 50 N	In-Kind (describe)	-		11.7.7
Hartsville, IN 4724	Other Receipts:			
,	Misc. (specify)] W
Contributor's Occupation (If required)	0-40-40-4	<i>*</i>		
2 Victoria Griffin	Contributions: Direct	1000	\$/000	;
1020 Bayside Ct. Célumbus, IN 47201	In-Kind (describe)			5/18/17
Columbus, DN 47201	Other Receipts:			
	Misc. (specify)			₍₁)
Contributor's Occupation (if required)				
3 Jorge & Melinda Morales	Contributions: Direct	450	*450	5/18/17
6024 Leatherback for.	In-Kind (describe)		100	
Columbus IN 47201	Other Receipts:			
	Misc. (specify)			LW 1
Contributor's Occupation (if required)				UV
* Warren & Molla Schridt	Contributions:	75)	250	5/14/17
15 North 400 E	In-Kind (describe)	200	200	209117
Columbus, IN 47003	Other Receipts:		!	
·	Misc. (specify)			,)
Contributor's Occupation (if required)				<u>lw</u>
* Kenneth Whipker	Contributions:	→	250	5/2/-
Skenneth Whipker 911 Franklin St. Columbus, IN 47201	In-Kind (describe)	250	250	5/25/17
Columbus, IN	Other Receipts;			
(47av)	Misc. (specify)			1
Contributor's Occupation (if required)				W
SUBTOTAL 1	THIS PAGE OF SCHEDULE A	\$ 2450.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	ON THE LAST PAGE ONLY 15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE	NUMBI	≅R	
Page _	3	of	5	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. Jefrey Back 5121 Woodbriar Ct.	Contributions: ☑—Direct ☐ In-Kind (describe)	250	250	5/20/17
Columbus, IN 47001	Other Receipts: Interest Loan Misc. (specify)			lu)
Contributor's Occupation (if required)		_		LW
Charles & Emply Corbin 5291 West SR 46	Contributions: Direct In-Kind (describe)	250	250	5/25/17
Columbus, IN 47201	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (If required)	Nilse. (specify)			Lu)
3. Pode of the Patronolii	Contributions;			,
Barbara & Terry Piotrowski 4901 & Poplar Dr.	☐ In-Kind (describe)	250	250	Willia
Columbus, IN 47201	Other Receipts: Interest Loan Misc. (specify)			,
Contributor's Occupation (if required)				LW
* Matt & Kyra Myers	Contributions:	200	200	. / 1
1042 Tanbark Dr.	In-Kind (describe)	200	0	7/10/17
Columbous 7N 47203	Other Receipts: Interest Loan Misc. (specify)			,
Contributor's Occupation (if required)	Wilso, (specify)			LW
	Contributions:			
5 Martha Myers 1511 West Paula Dr.	In-Kind (describe)	200	200	8/23/17
Columbus, AV47701	Other Receipts: Interest Loan		į	1,7,
	Misc. (specify)			10
Contributor's Occupation (if required)		1. En no		
SUBTOTAL 1 TOTAL OF ALL PAGES OF SCHEDULE A	HIS PAGE OF SCHEDULE A ON THE LAST PAGE ONLY	\$ 1150.00		
	1 15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE	NUMBI	ER	,
Page _	4	of	5	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 Lew & Bethie Wilson 3807 Spruce St.	Contributions: ⟨⊠ Direct □ In-Kind (describe)	500	500	12/19/19
Columbus, IN 4703	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)		_		I LW
3660 Woodside Dr	Contributions: Direct In-Kind (describe)	600	600	7017
Columbus, FN 47 203	Other Receipts: Interest Loan Misc. (specify)	- 		2017
Contributor's Occupation (if required)				William
3 Randall Tucker	Contributions:			010,001
4380 N Riverside	In-Kind (describe)	300	300	2017
Columbus II 47213	Other Receipts: Interest Loan Misc. (specify)			2017
Contributor's Occupation (if required)		<u> </u>		LW
1 J Grant Tucker	Contributions:		<u>, _ , _ , _ , _ , _ , _ , _ , _ , _ , _</u>	
330 Franklin St.	In-Kind (describe)	300	300	2017
Columbus, # 47%,	Other Receipts:			
	Misc. (specify)			14)
Contributor's Occupation (if required)	Contributions:			OVO
Gregoenerschel	Direct In-Kind (describe)			
1612 Fronklyott	☐ In-Kind (describe)	240	240	2017
"Greg Scherschel 1612 Fronkligft Lolumbus IN 47201	Other Receipts:			
·-	Misc. (specify)			1(0)
Contributor's Occupation (if required)				CVO
	HIS PAGE OF SCHEDULE A	\$ 1940.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY	\$ <u>(</u>		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER					
Page _	5	of	_5		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
Deborah Yelay US 31 Columbus FN 47201	Contributions: Direct In-Kind (describe)	300	300	2017
Columbus +N 47201	Other Receipts: Interest Loan Misc. (specify)			11
Contributor's Occupation (If required)				LWllme
2 Sprague Rentals P.O. BOX 508 Columbus, IN 4702	Contributions: Direct Signature (describe)	900	*900	
Columbus, IN 4002	Other Receipts: Interest Loan Misc. (specify)	}		
Contributor's Occupation (if required)				
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions: Direct In-Kind (describe)			
Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)			
	HIS PAGE OF SCHEDULE A	\$ 200.00		
TOTAL OF ALL PAGES OF SCHEDULE A		\$ 9240.00		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER					
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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED RECEIVED BY
(street, number, city, state, ZIP code) 1. Taxpayers for Gregory Waller 3129 25th St., Unit 342 Columbus, IN 47203	Contributions: Direct	PERIOD 1300	1300	3/17 8/17 W
2 Comm. to Elect Rob Kitle Shuring 10295 & 50 M Columbus, IN 4723	Other Receipts:	200	200	8/31/17
	Misc. (specify)			LW
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
	THIS PAGE OF SCHEDULE A	\$ 1500.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$ 1500.00		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER					
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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1 Fichard Hawes Insurance 1428 Franklin St. Columbus, IN 47001	Contributions: Direct In-Kind (describe)	500	500	8/2/17
Columbus, # 47001	Other Receipts: Interest Loan Misc. (specify)			lw
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)	-		
	Other Receipts; interest Loan Misc. (specify)	-		
5.	Contributions: Direct In-Kind (describe)	-		
	Other Receipts: interest Loan Misc. (specify)			
CHRIO	TAL THIS PAGE OF SCHEDULE A	\$ 500.00		
TOTAL OF ALL PAGES OF SCHEDU		1 s 500 nn		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER						
Page _	1	of				

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 Barth. Co. Republican Women's Club 15250 & Base Rd. Cell. 47203	Contributions: Direct In-Kind (describe)	450	450	2/10/17
Cel. 47203	Other Receipts: Interest Loan Misc. (specify)			LW
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
SUBTOTA	L THIS PAGE OF SCHEDULE A	\$ 450.00		
TOTAL OF ALL PAGES OF SCHEDUL	E A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet)	\$ 450.00		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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						
Page	1	of	1			

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	DATÉ OF EXPENDITURE
code A Jes Ciruma 328 Jacksonfl. Columbus 4729		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	300	300	11/1/16
Sprague Rentals UC Sprague Rentals UC 50.0.180x 508 Columbus 47202		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	4500	4500	2017
Sample Insurance 2625 Foxpointe Dr. Columbus IN472003		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	615	615	4/2017
Code A Banh. Co. Fair		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$975	8975	5/2017
Prestigne 1307 134 St.		### In-Kind Payment of Debt Returned Contribution Other Purpose:	1217.23	1217. 22	5/2017
Columbus 47201 Code A Simmons Winury 8111 E 450 N Col FN 47203		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	6383.66	6383.66	Jun 8 Nov 2017
Andio Magic 2000 W 2005	:	□ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other □ Purpose:	650	650	2017
47001	SUBTOTAL THIS P	AGE OF SCHEDULE E			
TOTAL OF ALL	PAGES OF SCHEDULE B ON T	HE LAST PAGE ONLY	7 S 1/1 C		