

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

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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

'es

No No

TOTAL PAGES IN ENTIRE CFA-4 REPORT

13 THIS AN AMENDIMENT? Tes X. NO	Ĺ		<u> </u>
COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization) Check if this is a new	name		
Bartholomew Country Republican Comm		, p	•
2. Acronym or Abbreviated Name (if any)		nmittee Telephone Number	<u> </u>
	(B1)	2 341-142	
4. Mailing Address (address where all campaign finance correspondence is received)	heck if the	nis is a new address	- 7
P.O. Box 1723			
5. City, State, ZIP Code	6. Par	ty Affiliation (if applicable)	
Columbus	ne and	epublican	
CANDIDATE INFORMATION (For Candidate's C	ommit	tees Only)	
7. Full Name of Candidate (Include any nickname)	8. Par	ty Affiliation or If Independe	nt Candidate
	_		i
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Cc	ounty of Residence	
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election * Annual Nomination Other		L Pre-Con	
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement of	f Organizatio	on) Post-Cor	nvention
12. Reporting Period:		COLUMN A	COLUMN B
From: 1011114 Through: 1213112014		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		10.562.20	
14. Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS			9.054.05
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (use Schedule A)		(2/m/) 0	50.0
15b. Unitemized		800.00	5,925.00
15c. Add lines 15a and 15b in both columns SUBTO	ΟΤΔΙ	1100000	16,985.00
40 4445	OTAL	4,985.00	31,964,05
EXPENDITURES	OTAL	15, 547.20	31,964.05
(Note: These amounts include in-kind expenditures and loan repayments.)	• • • •	,	
17a. Itemized (use Schedule B) (Public Question: use Schedule C)	11	11 1 22 115	20 0/15
17b. Unitemized		4,632.40	20,045.02
17c. Add lines 17a and 17b in both columns	TOTAL	4.791.21	0 200 55
	TOTAL	10 756 00	2,208.0360
19. Debts OWED BY the committee (use Schedule D)	101712	10, 150 84	10,755.99
20. Debts OWED TO the committee (use Schedule E)			
CERTIFICATION		×	OR OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TR Signature of Treasurer		tiat E	CELVEN
man Welmen heasure		3/2/2015	, n. n. s.

Signature of Candidate (if applicable)

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 products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5) A person who products to the copied for sale or used for any commercial purpose (IC 3.9.4.5).

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, IC 3-9-4-18)

BARTHOLOMEN CO. COURTS



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	

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	DATE RECEIVED
Lew & Bettie Wilson 3307 Spruce St.	Contributions: Direct In-Kind (describe)	\$550	YEAR-TO-DATE	19/16/14
Columbus, IN 47803	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
Mahan Leasing Tom & Peopony Owens P.D. BOX 8 Columbus, IN 47802	Contributions:	\$250	*250	10/16/14
P. D. COX 8 Columbus, IN 47802	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)			1	, ,
. 3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (If required)		ļ		
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
SUBTOTAL T TOTAL OF ALL PAGES OF SCHEDULE A	HIS PAGE OF SCHEDULE A	\$ 800.00		
(Enter total on ITEM	15a of the Summary Sheet)	\$ 800.00		1



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 NUMB	ER
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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	DATE RECEIVED RECEIVED BY
1.	Contributions: Direct In-Kind (describe)	PERIOD	YEAR-TO-DATE	RECEIVED BY
	Other Receipts: Interest Loan Misc. (specify)			
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)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$		<u></u>
TOTAL OF ALL PAGES OF SCHEDULE		\$		



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

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS 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 labor organizations 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).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE
(street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED RECEIVED BY
1.	Contributions:	PERIOD	MEARTIODUATE	KISCEIVED BY
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	Other Receipts:			
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	In-Kind (describe)			
	L. III-Killa (describe)			,
	Other Receipts:			
	interest Loan			
	Misc. (specify)			
3.	Contributions:			
.	Direct		·	
	☐ In-Kind (describe)			
		i .		
	Other Receipts:		ì	
	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			1
	Misc. (specify)		j	•]
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$		
(Enter total on ITE	M 15a of the Summary Sheet)	▼		



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).

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CONTRIBUTOR'S FULL NAM FULL MAILING ADDRES (street, number, city, state, Zi	SS	YPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1,	Co C	ontributions; Direct n-Kind <i>(describe)</i>	. 21.105		,
		her Receipts: Interest Loan Misc. (specify)			3
2.		ntributions: Direct In-Kind <i>(describe)</i>			
·		ner Receipts: Interest			
3.		ntributions: Direct In-Kind <i>(describe)</i>		724	
		ner Receipts: Interest			
4,		ntributions: Direct In-Kind <i>(describe)</i>			
		er Receipts: Interest Loan Misc. (specify)			
5.	Cor	ntributions: Direct In-Kind <i>(describe)</i>	1		
		er Receipts: Interest			
	SUBTOTAL THIS	PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGE	S OF SCHEDULE A ON	THE LAST PAGE ONLY			
	(Enter total on ITEM 15:	a of the Summary Sheet)	\$		



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 contribution, 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 candidates, legislative caucus, and regular party committee 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	DATE RECEIVED RECEIVED BY
(street, number, city, state, ZIP code)	PERIOD	YEAR-TO-DATE	VECTIATO DE
1.	Contributions;			
	Direct			
	In-Kind (describe)	ľ		-
	Other Receipts:	1	•	
	Interest Loan			
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2.	Contributions:			
	Direct			
	in-Kind (describe)			
	Other Receipts:]		
	Interest Loan			
	Misc. (specify)			
	Misc. (specify)			
3.	Contributions:			
	Direct			
	☐ In-Kind (describe)	ļ		
	,			
	Other Receipts:			
	Interest Loan			
	l			
	Misc. (specify)			•
				•
4.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
	[Wilso: (Specify)			
5.	Contributions:	•		
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	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)		l	
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S	UBTOTAL THIS PAGE OF SCHEDULE A	\$		
	CHEDULE A ON THE LAST PAGE ONLY	· · · · · · · · · · · · · · · · · · ·		
	otal on ITEM 15a of the Summary Sheet)	\$		
(Enter to	nai on it Em 10a of the Summary Sheet)			



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 perty 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						
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Page	of					

RECIPIENT'S NAME AND MAILING ADDRE	RECIPIENT'S OCCUPATION	THE OF EACH CITETION		COLUMN B	DATE OF
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE
Code Indiana Republic State Committee 47 Sower Meridian 81. Indianapolis 4620		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	[#] 500°	F1,500	POLICH
The Republic 333 2Nd St.	Advertising	Direct In-Kind Payment of Debt Returned Contribution Other Purpose;	482.40	925.5%	॥१२०१।५
Tereon Short Columbus, IN 47201	Office work	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	⁹ 500.00	50000	Myley
Sprague Kentals P.O. Box 1514 Columbus 47202	Office Rental	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	E900.00	\$5400.00	114/19
Committee to Elect Chris Ogle	County Council	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	⁸ 250°-	⁹ 250	41/4/14
Code Committee to Elect Jay Phelps	County Clerk	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	*250°°	8 250	ulalie
Committee to Elect Pen Jackson	Columbus Township	Purpose;	F25010	250	11/4/14
	Trustae				
	SUBTOTAL THIS PAG		\$4,132.40		
TOTAL OF ALL	PAGES OF SCHEDULE B ON THE (Enter total on ITEM 17a of t		\$		

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REPORT OF RECEIPTS AND EXPENDITURES

Chale Fermi 4564 (112/11 05) Indiana Election Commission (IC 3-9-5-14

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Summary Sheet, All ou	mulativa axpens	as paid to individu	<i>va</i> ta, husinesses, tab	of organizations and :	other entities OVER \$100 per
reciolant, within a calc	arin was title	the Hemisted on	this schedule four	C 200 # reguler par	ly committee! All cumulation.
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code 10 mmittee to Elect Connie Lawson	Secretary of State	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	*250	*250	11/4/14
Committee to Elect Suzana Cronch	State Auditor	Purpose:	⁴ 250	250	ાીમાન
Code	на жүчүй түз каналын түй түй бай бай бай бай бай бай бай бай бай ба	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			Nagaran a da mana a d
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
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TOTAL OF ALL PA	GES OF SCHEDULE B ON THI (Enter total on ITEM 17a of		\$4632.40		



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

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

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. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

FILE NUMBER						
Page	of					

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Enter Text of Public Question	PUBLIC QUESTIO	N INFORMATION			
Enter Text of Funds agreement					
	Local		•		
Position: Supported Oppos		TYPE OF EXPENDITURE	COLUMN A	001418441.0	·.
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	and PURPOSE (be specific)	AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code		Direct In-Kind Payment of Debt			
		Returned Contribution			
		Other Purpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
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		Other Purpose:			
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Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
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		Purpose:			
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		Other Purpose;			
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		☐ Returned Contribution			
	·	Purpose;			
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	S OF SCHEDULE C ON THE	LAST PAGE ONLY	\$		
	<u>'Enter total on ITEM 17a of t</u>	he Summary Sheet)	Ψ		



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

(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						
Page		of				

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any)	AMOUNT	DATE DEBT	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED	YEAR-TO-DATE	PERIOD
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	TOTAL OF ALL	PAGES OF SCHEDULE	D ON THE LAS	ST PAGE ONLY	\$
		(Enter total on I	TEM 19 of the S	ummary Sheet)	Ψ



(CFA-4 SCHEDULE E) DEBTS OWED TO 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, <u>regardless of the amount</u>, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

FILE NUMBER						
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Page	of					

BORROWER'S NAME & MAILING ADDRESS	CO-SIGNER'S NAME	ORIGINAL AMOUNT	DATE DEBT CUMULATIVE PAID		OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	& MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED	YEAR-TO-DATE	PERIOD PERIOD
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