

Signature of Treasurer

Signature of Candidate (if applicable)

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)

Indiana Election Commission (IC 3-9-5-14)

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.

(CFA-4) **Summary Sheet**

FILE NUMBER TOTAL PAGES IN ENTIRE CFA-4 REPORT

THIS AN AMENDMENT? Tyes XXX No		_			
COMMITTEE INFORMATION					
Full Name of Committee (as on Statement of Organization)	10				
an Jackson for Columbus Township Trustee					
Acronym or Abbreviated Name (if any) 3. Committ			hone Number		
Acronym or Appreviated Name (ii dily)	(812) 344-389				
Mailing Address (address where all campaign finance correspondence is received)	k if this i	s a new ad	ddress		
302 Laurel Drive 6	6. Party A	Affiliation (i	f applicable) f	Republican	
City, State, ZIP Code					
CANDIDATE INFORMATION (For Candidate's Com	nmittee	s Only)			
	3. Party A	Affiliation o	r if Independe	nt Candidate	
Full Name of Candidate (include any nickname)	Republica	an			
enjamin Price Jackson	10. Coun	ty of Resid	dence Barthol	omew	
. Office Sought (Include district number, if arry, Not required for exploratory seminatory					
olumbus Township Trustee TYPE OF REPORT			CONVENTIO	ON CANDIDATES ONL	
			Check one:		
1. Check one:			_ Pre-Convention		
Pre-Primary Pre-Election Annual Nomination Other	roanization)		Post-Co	nvention	
Final/Disbands Committee (lines 18, 19, and 20 must be "0") U Outgoing Treasurer (within 10 days amend Statement of Or	garazanony		UMN A	COLUMN B	
2. Reporting Period:			-uwin A Period	Year to Date	
rom: 01/01/2017 Through: 12/31/2017		-1.89			
Cash on hand and investments at the beginning of this reporting period.		-1.03		-1.89	
4. Cash on hand and investments January 1, current year.				7.00	
CONTRIBUTIONS AND RECEIPTS					
Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		250.00)	250.00	
5a. Itemized (use Schedule A)		0	<u>-</u>	0	
15b. Unitemized	YA1	250.00	2	250.00	
15c. Add lines 15a and 15b in both columns SUBTO				248.11	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	DTAL	248.1	1	240.11	
EXPENDITURES					
(Note: These amounts include in-kind expenditures and loan repayments.)					
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		0		0	
17h Unitemized		0		0	
	OTAL	0		0	
17c Add lines 17a and 17b in both columns		248.1	1	248.11	
17c. Add lines 17a and 17b in both columns	TOTAL	240.1			
17c. Add lines 17a and 17b in both columns 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	0			
17c. Add lines 17a and 17b in both columns	TOTAL				

candidate

Date:

JAN 17 2010

BARVENONEW CO. COURTS



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

(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 YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
<u> </u>	Contributions:	250.00	250.00	
1.	Direct			40/00/0047
Larry & Judith Jackson	in-Kind (describe)			12/09/2017
1022 Franklin Street				
Columbus, IN 47201	Other Receipts:			
Contributor's Occupation (if required)	☐ Interest ☐ Loan ☐ Misc. (specify)			
Manufacturers Rep	I Made: (opeany)			
	Contributions:			
2.	Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	interest Loan Misc. (specify)			
	L Milst. (apacity)			
Contributor's Occupation (if required)				
3.	Contributions:			i
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
4.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions:			
	In-Kind (describe)			
	- In this fasting)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 250, ± \$ 250, ±		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$ 9 60,00		
(Enter total on ITE	M 15a of the Summary Sheet)	1 × 0000'		