

ignature of Treasurer

ignature of Candidate (ff applicable)

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

ISTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For ssistance in completing this form, see instructions on the reverse side.

Yes

S THIS AN AMENDMENT?

🗸 No

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

Full Name of Committee (as on Statement of Organization) Acronym or Abbrevistes Name (if any) Acronym or Abbrevistes Name (if any) Acronym or Abbrevistes (address where all campaign finance correspondence is received) Cly, State, ZIP Code Cly, State, ZIP Code CONTRIBUTIONS AND RECEIPTS CONVENTION AANDIDATES ONLY Check if this is a new address G. Party Affiliation (if applicable) Convention or if Independent Candidate Convention or if Independent Candidate Convention or if Independent Candidate TYPE OF REPORT 1. Check one: Pre-Primary Pre-Flection Annual Onomination Other Pre-Primary Pre-Flection Annual Through: 10 and 20 must be 19, 19	COMMITTEE INFORMATION			76 Ta . 1 Ta
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ARNING: 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 es 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 ampaign 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)

OCT 17 2019

Date

Date

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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 YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 DIADA Wintend-Smith 125 Dobbs Sten St T. H. IN 47803	Contributions: Direct In-Kind (describe)	* 7	ROBORT AND	9/16/19
7. H. IN 47803	Other Receipts: Interest Loan Misc. (specify)	2009.46	1	D. Snith
Contributor's Occupation (if required)				
P.O. BOX 2010	Coptributions: Direct In-Kind (describe)	453.60	453 60	10/11/19
P.O. BOX 2010 T. H. Tn 47803	Other Receipts:			N Sin +4
1. N 11 4100	Misc. (specify)			D.OL. 1.
Contributor's Occupation (if required)				
3.	Contributions: Direct			
	In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)		0	
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)			
35.	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)		0 11/12 N	(8X)	100 No. 100 No. 1
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TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY 1 15a of the Summary Sheet)	\$ 2463.06		



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

NSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN 3LACK 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 rom 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 rom 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 (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
	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan			
	Misc. (specify) Contributions:			
	Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
.9	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
	Contributions: Direct In-Kind (describe)			
XI.	Other Receipts: Interest Loan Misc. (specify)		1	
	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
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TOTAL OF ALL PAGES OF SCHEDULE (Enter total on IT)	A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet)	\$		



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 (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,	Contributions: Direct In-Kind (describe) 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)			
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5.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)			
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(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 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
Pachydeen Political Action Connetter PD Box 447 Seelyville, IN 47878	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)	600-00	600 62	8/36/19 P. Snidl
	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)		SI.	
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G	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	\$ 600.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$ 600.00		



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

NSTRUCTIONS: 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 locument contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER i100 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, neterest 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	TYPE OF CONTRIBUTION	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
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	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
	Contributions: Direct In-Kind (describe)			
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	Other Receipts: Interest Loan Misc. (specify)			
SUBTOTAL 1	HIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY 115a of the Summary Sheet)	\$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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NSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this
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schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the
SCHEDULE, See Instituctions of the reverse side. This seriedate is asset to see that the reverse side.
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Summary Sheet. All cultivative expenses paid to individuals, businesses, labor organizations
recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative
recipient, within a calendar year word be itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on this schedule lover \$250, if regard year, and the itemized on the itemized on the itemized year.
in a line in kind, recording of amount paid to political committees, (such as transfers-out from candidate, legislative
expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative
The standard and the committee of MIST be itemized on this schedule
caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER					
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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
Staples - 125 Davis T.H.J 47803	5	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	55.00	55	10/8/19
1014 Popular 8.11 1 47803		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	2141.77	2141,77	9/20/19
staples 125 Davis J. H. J. 47808		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	9),47	91, 47	10/8/19
LAMAR 5711 W. Minnes Indianapolis Fn 4	50+a	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	850.	850.	19/1/19
MARCOURT 1765 S. 175 W MILROY IN 46156		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	376.85	799,22	9/16/19
1170 Co. G.O.P. P.O. BOX 2010		Direct In-Kind Payment of Debt Returned Contribution Other Purpose	453.60	453,60	10/11/19
GREAT Deals Mag. 1016 popular St 1 47803		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	430 -	430.	9/28/19
	SUBTOTAL THIS PAC		\$4399,06		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON THE (Enter total on ITEM 17a of	E LAST PAGE ONLY the Summary Sheet)	\$4398.06		



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 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.

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

FILE NUMBER

nount paid to political committees supporting or op	posing a public question, MOST be Remiz	ed on this schedule.			
				Page	of
Enter Text of Public Question		ON INFORMATION	5.		
Type of Question: Statewide Position: Supported Oppo					
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Staples 175 Davis aux 3, AJ 47802	Printing	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	9147	91.47	8/4/19
Staples 125 Davis J. N. Dn 47502	Starps	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	55.00	55.00	84/19
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose;			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Sode		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
ode		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
		GE OF SCHEDULE C	\$146.47	The last the	Harada W
TOTAL OF ALL PAG	SES OF SCHEDULE C ON THE (Enter total on ITEM 17a of	TE LAST PAGE ONLY The Summary Sheet)	\$146.47		



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	
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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S	DATE DEBT PAID	CUMULATIVE PAID	OUTSTANDING BALANCE THIS	
	NAME & MAILING ADDRESS (if any) (street, number, city, state, ZiP code)	NATURE OF DEBT	INCURRED	YEAR-TO-DATE	PERIOD
ENDER'S OCCUPATION:					
ENDER'S OCCUPATION:					
ENDER'S OCCUPATION:					
			-		
ENDER'S OCCUPATION:					
INDER'S OCCUPATION:					
ENDER'S OCCUPATION:					
NDER'S OCCUPATION		SUBTOTA	AL THIS PAGE	OF SCHEDULE D	\$
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY					
	TOTAL OF ALI	(Enter total on	ITEM 19 of the	Summary Sheet)	\$



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

(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, regardless of the amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

FILE NUMBER					
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BORROWER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	CO-SIGNER'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	ORIGINAL AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
9					
				OF SCHEDULE E	
	TOTAL OF A	ALL PAGES OF SCHEDUI (Enter total on	_E E ON THE LA ITEM 20 of the	AST PAGE ONLY Summary Sheet)	\$