



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

State Form 4886 (R:11-09)  
Indiana Election Commission JC 3-9-14

(CFA-4)  
**Summary Sheet**

FILE NUMBER

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.

UNOFFICIAL FORM - PLEASE REUSE CFA-4 REPEATEDLY

IS THIS AN AMENDMENT?  Yes  No

**COMMITTEE INFORMATION**

1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name <b>Friends of Bendzsa</b>	
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number L 812 ) 220-8007
4. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address 7000 N Graham Pl	
5. City, State, ZIP Code W. Terre Haute IN 47885	6. Party Affiliation (if applicable) Republican Party

**CANDIDATE INFORMATION (For Candidates Committees Only)**

7. Full Name of Candidate (include any nickname) Lucas Tyler George Bendzsa	8. Party Affiliation or if Independent Candidate Republican
9. Office Sought (include district number, if any. Not required for exploratory committee.) County Council	10. County of Residence Vigo

**TYPE OF REPORT**

**CONVENTION CANDIDATES ONLY**

11. Check one: <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other <input checked="" type="checkbox"/> First Districts Committee (has 18, 15, and 21 seats in 2020) <input type="checkbox"/> Outgoing Treasurer (only 12 days before Statement of Organization)	Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention
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12. Reporting Period: From 5/9/2020 Through 2/9/2020	COLUMN A Total Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period	\$182.89	
14. Cash on hand and investments January 1, current year		\$0

**CONTRIBUTIONS AND RECEIPTS**

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (see Schedule A)	\$0	\$600
15b. Unitemized	\$0	\$455.73
15c. Add lines 15a and 15b in both columns	<b>SUBTOTAL</b>	<b>\$1055.73</b>
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	<b>TOTAL</b>	<b>\$1055.73</b>

**EXPENDITURES**

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (see Schedule B) (Public Question: see Schedule C)	\$139.55	\$945.72
17b. Unitemized	\$43.44	\$110.01
17c. Add lines 17a and 17b in both columns	<b>SUBTOTAL</b>	<b>\$1055.73</b>
18. Cash on hand and investments at close of this reporting period (audited 17c flow 16 in both columns)	<b>TOTAL</b>	<b>\$0</b>
19. Debts OWED BY the committee (see Schedule D)		
20. Debts OWED TO the committee (see Schedule E)		

**CERTIFICATION**

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer <i>Barbara Hoopman</i>	Title Treasurer	Date 10/16/2020
Signature of Candidate (if applicable) <i>Lucas Bendzsa</i>		Date 10/16/2020 C.B.

FOR OFFICE USE ONLY

**RECEIVED**  
BRAD M. NEWMAN

OCT 16 2020  
Clerk of the  
Vigo Circuit Court



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**  
State Form 4626 (R10-11-08)  
Indiana Election Commission (IC 3-9-14)

**(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 listed 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 \_\_\_\_\_ of \_\_\_\_\_

REPORTOR NAME AND MAILING ADDRESS (Street, number, city, state, zip code)	REPORTOR POSITION (OFFICE HOURS) (If applicable)	TYPE OF EXPENDITURE AND PURPOSE (If applicable)	AMOUNT PAID IN THE PERIOD	BUDGET REMAINING PERIOD	DATE OF EXPENDITURE
Code: C Committee to elect Mike Morris 3201 Erie Canal Road Terre Haute, IN 47802	Business Owner  County Commissioner	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contributor <input type="checkbox"/> Other _____ Purpose:	\$139.55	\$139.55	7/11/2020
Code: _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contributor <input type="checkbox"/> Other _____ Purpose:			
Code: _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contributor <input type="checkbox"/> Other _____ Purpose:			
Code: _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contributor <input type="checkbox"/> Other _____ Purpose:			
Code: _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contributor <input type="checkbox"/> Other _____ Purpose:			
Code: _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contributor <input type="checkbox"/> Other _____ Purpose:			
Code: _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contributor <input type="checkbox"/> Other _____ Purpose:			
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>			\$		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> (Enter total on ITEM 17a of the Summary Sheet)			\$		