



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**  
State Form 4608 (R17 / 8-23)  
Indiana Election Division (IC 3-9-5-14)

(CFA-4)  
**Summary Sheet**

**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.

<b>FILE NUMBER</b>
<b>TOTAL PAGES IN ENTIRE CFA-4 REPORT</b>

IS THIS AN AMENDMENT?  Yes  No

**COMMITTEE INFORMATION**

1. Full Name of Committee (as on Statement of Organization) Elect Dr. Janie Myers as Vigo County Coroner		<input type="checkbox"/> Check if this is a new name.
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number ( 8122895223 )	
4. Mailing Address (Address where all campaign finance correspondence is received.) 5401 Tottenham Circle		<input type="checkbox"/> Check if this is a new address.
5. City, State, ZIP Code Terre Haute, IN 47803	6. Party Affiliation (if applicable)	

**CANDIDATE INFORMATION (For Candidate's Committees Only)**

7. Full Name of Candidate (Include any nickname.)	8. Party Affiliation or If Independent Candidate Democratic
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Vigo County Coroner	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 checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other _____ <input type="checkbox"/> Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) <input type="checkbox"/> Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)	Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention	
12. Reporting Period (mm/dd/yy): From: 04/13/2024 Through: 10/11/2024	<b>COLUMN A This Period</b>	<b>COLUMN B Year to Date</b>
13. Cash on hand and investments at the beginning of this reporting period.	0.00	
14. Cash on hand and investments January 1, current year.		-1,412.68

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

15a. Itemized (Use Schedule A.)	6,425.00	
15b. Unitemized	1,655.00	
15c. Add lines 15a and 15b in both columns. <b>SUBTOTAL</b>	8,080.00	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. <b>TOTAL</b>	6,667.32	

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

17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	5,633.25	
17b. Unitemized	1,284.39	
17c. Add lines 17a and 17b in both columns. <b>SUBTOTAL</b>	6,917.65	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) <b>TOTAL</b>	-250.32	
19. Debts OWED BY the committee (Use Schedule D.)	5,426.47	
20. Debts OWED TO the committee (Use Schedule E.)	0.00	

**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	Title Treasurer	Date (mm/dd/yy) 10/17/24
Signature of Candidate (if applicable)		Date (mm/dd/yy) 10/17/24

**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 Level 6 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)

FOR OFFICE USE ONLY

REC'D ABSENTEE VOTERS  
24 OCT 17 PM 02:25:16



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**  
State Form 4606 (R17 / 8-23)  
Indiana Election Division (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 1 of 4

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i>
				RECEIVED BY
1. Mel Burkes  <i>Contributor's Occupation (if required)</i>	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$500.00		04/22/24
2. Van and Carlene Sakburn  <i>Contributor's Occupation (if required)</i>	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$250.00		04/17/24
3. Kandace Hinton  <i>Contributor's Occupation (if required)</i>	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$125.00		4/23/24
4. Mary Howard-Hamilton  <i>Contributor's Occupation (if required)</i>	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$250.00		4/23/24
5. Roland Kohr 1083 Cedar Ridge Ct  <i>Contributor's Occupation (if required)</i>	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$500.00	\$1,000.00	4/23 & 9/30
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		\$	<u>1,625.00</u>	
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		\$		



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

State Form 4606 (R17 / B 23)  
Indiana Election Division (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 2 of 4

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i>
				RECEIVED BY
1. Carlene Sakbun  <i>Contributor's Occupation (if required)</i>	Contributions <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$200.00		4/23/2024 19:04
2. Derek Fell 5491 Ryanne Marie Ln Terre Haute IN  <i>Contributor's Occupation (if required)</i>	Contributions <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$150.00		7/12/2024 8:39
3. Bamidele Adeagbo 1215 S. City View St Wichita KS  <i>Contributor's Occupation (if required)</i>	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$850.00	\$1,850.00	7/23/2024 3:13
4. Kumar Gaurav 4059 Driver Ct Terre Haute IN 47802  <i>Contributor's Occupation (if required)</i>	Contributions <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$250.00	\$500.00	8/17/2024 17:46
5. Scotia Brown 1231 South Center Street Terre Haute IN  <i>Contributor's Occupation (if required)</i>	Contributions <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$350.00		8/18, 4/23
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		\$	<u>1,500</u>	
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		\$		



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**  
State Form 4606 (R17 / 8-23)  
Indiana Election Division (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**

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i>
				RECEIVED BY
1. Jeanne Rozel 3930 Ho Lane  Contributor's Occupation <i>(if required)</i> _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$250.00		7/26/24
2. James Orrington 3822 Troon Street  Contributor's Occupation <i>(if required)</i> _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$500.00	\$1,000.00	08/23/24
3. Eric Frey 20895 Clark Rd, 60423  Contributor's Occupation <i>(if required)</i> _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$450.00		8/23/24
4. Joe and Ken  Contributor's Occupation <i>(if required)</i> _____	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <i>(describe)</i> <u>fundraiser</u> Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$500.00		8/22/24
5. Dr. Richard Unger  Contributor's Occupation <i>(if required)</i> _____	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <i>(describe)</i> <u>postcards</u> Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$200.00	\$700.00	9/26/24
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		\$ <u>1,900</u>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		\$		



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

State Form 4606 (R17 / 8-23)  
Indiana Election Division (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 <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i>
				RECEIVED BY
1. Eric Frey at Law	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$300.00		4/23/24
2. Wright, Shagley, Lowery	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$150.00		4/18/24
3. Lyle flower	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <i>(describe)</i> <u>flowers 4 fundraiser</u> Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$200.00		4/27/24
4. Elect tonya Pfaff	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$450.00		4/23,8/24
5.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____			
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		\$ <u>1,100</u>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		\$ <u>4,250</u>		



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE:**  
Ball Form 461R (R37) (8-23)  
Indiana Election Division (C 5-9-5-14)

**(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 (plus a \$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 2

RECIPIENT'S NAME AND MAILING ADDRESS <small>(street number, city, state, ZIP code)</small>	RECIPIENT'S OCCUPATION <small>OFFICE SOUGHT (if applicable)</small>	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE <small>(mm/dd/yy)</small>
Code _____ Hayden Core	Photographer	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose	\$400.00		4/22/24
Code _____ City press	yard signs	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose	\$856.00		4/22/24
Code _____ DLC media	radio ads	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose	\$1,350.00		4/30/24
Code _____ Bar Basco	fundraiser	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose	\$625.66		4/25/24
Code _____ Facebook ads	ads	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose	\$107.76		4/30/24
Code _____ Face book ads	ads	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose	\$425.00		5/3-7
Code _____ Tammy Boland - ad for WE Live	ad	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose	\$165.00		8/2/24
<b>SUBTOTAL. THIS PAGE OF SCHEDULE B</b>			\$3,929.42		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 17a of the Summary Sheet.)</i>			\$		



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE:**  
State Form 4606 (R1718-23)  
Indiana Election Division (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 2 of 2

RECIPIENT'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	RECIPIENT'S OCCUPATION		TYPE OF EXPENDITURE and PURPOSE <i>(be specific)</i>	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE <i>(mm/dd/yy)</i>
	OFFICE SOUGHT	<i>(if applicable)</i>				
Code _____ Vanderbeek		fundraiser driver	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$140.00		8/22
Code _____ Pizza -Dem rally		sponsor	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$108.12		8/26
Code _____ Art spaces		fundraiser contribution	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$106.24		9/17/24
Code _____ Promo		yard signs	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$707.27		9/20/24
Code _____ Courtney Weber		Truck rental with sandbags	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$140.00		9/9/24
Code _____ USPS		postage	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$331.00		10/1, 10/7
Code _____ Cowan and cowan		Fundraiser flowers	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$171.20		10/10
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>				\$1,703.83		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 17a of the Summary Sheet.)</i>				\$5,633.25		



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

State Form 4606 (R17 / 8-23)  
Indiana Election Division (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 <u>1</u> of <u>1</u>	

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS <i>(if any)</i> <i>(street, number, city, state, ZIP code)</i>	AMOUNT	DATE DEBT INCURRED <i>(mm/dd/yy)</i>	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
Dr Janie Myers	5401 Tottenham Circle Terre Haute	\$5,426.47	2000	\$0.00	\$5,426.47
LENDER'S OCCUPATION					
LENDER'S OCCUPATION					
LENDER'S OCCUPATION					
LENDER'S OCCUPATION					
LENDER'S OCCUPATION					
<b>SUBTOTAL THIS PAGE OF SCHEDULE D</b>					\$5426.47
<b>TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 19 of the Summary Sheet.)</i>					\$5426.47