

State Form 4606 (R14 / 10-17) Indiana Election Division (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.

IS THIS AN AMENDMENT? Yes No

OF

(CFA-4) Summary Sheet

FILE NUMBER

40-8-11

TOTAL PAGES IN ENTIRE CFA-4 REPORT

10 THO AN AMENDMENT: 100		L		<del></del>
	COMMITTEE INFORMATIO	N		
1. Full Name of Committee (as on Statement of Organ	ization)			
COMMITTEE TO ELECT -	JOHN T. BOYD FOR	SHELLIF	F	
2. Acronym or Abbreviated Name (if any)		3. Comi	nittee Telephone Number	
	•	(21	9)778914	7
4. Mailing Address (Address where all campaign finan	ce correspondence is received.)	Check if th	is is a new address.	
10104 N. BEVERLY LA	NE			
5. City, State, ZIP Code			Affiliation (if applicable)	
——————————————————————————————————————	46350		DUBLICAN	
	EINFORMATION (For Candidate)			. O a sell'elete
7. Full Name of Candidate (Include any nickname.)		8. Party	Affiliation or If Independe	nt Candidate
JOHN THOMAS BE	<u> </u>	12	EPUBLICAN_	
9. Office Sought (Include district number, if any. Not re	equired for exploratory committee.)		nty of Residence	
SHERIFF OF LARD	OF DEPONT		<u>' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' </u>	N CANDIDATES ONLY
	OF REPORT		Check one:	N CANDIDATES ONE
11. Check one: Pre-Primary Pre-Election Annual Nomination	Other		Pre-Con	vention
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".)		d Statement of Ora		
	Outgoing Treasurer (within ten [10] days alream	Olatement of Orga		0011111111
12. Reporting Period (mm/dd/yy):	Through: 12-31-17		COLUMN A This Period	COLUMN B Year to Date
			11266,28	
<ol> <li>Cash on hand and investments at the beginning of</li> <li>Cash on hand and investments January 1, current</li> </ol>			11200100	
CONTRIBUTIONS				
(Note: these amounts include in-kind contributions and				
15a. Itemized (Use Schedule A.)		,	11446-	11六升6~
15b. Unitemized				
15c. Add lines 15a and 15b in both columns.	S	UBTOTAL	11446	11446
16. Add lines 13 and 15c in Column A and lines 14 and	d 15c in Column B.	TOTAL	22712.28	22717.28
EXPENDI	TURES			
(Note: These amounts include in-kind expenditures an	d loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use	e Schedule C.)		9838.00	9838-
17b. Unitemized				
17c. Add lines 17a and 17b in both columns.		UBTOTAL		
18. Cash on hand and investments at close of this reporting pe	eriod (Subtract 17c from 16 in both columns.)	TOTAL	12874.28	1287428
19. Debts OWED BY the committee (Use Schedule D.	)		<del>-</del>	
20. Debts OWED TO the committee (Use Schedule E.	)		FI	
	CERTIFICATION		<u> </u>	ERKS DEFICE NILY
CERTIFY THAT HAVE EXAMINED THIS STATEMENT. TO TH		IS TRUE, CORF	RECT AND COMPLETE	
Signature of Treasurer	Title	ם	ate (mm/dd/yy) JAN	1 6 2018
Signature of Candidate (if applicable)			ate (mm/dd/yy)	Ì
Signature of Sandada (in Approximation				eigentelentek
MARNING: Any information contained in this report may not be o	copied for sale or used for any commercial purp	ose. (IC 3-9-4-5)	A person who copped to !	PORTE CIRCUIT COURT
files a fraudulent report commits a Lever 6 felony. (IC 3-14-1-1 Campaign Finance Law commits a Class B misdemeanor, (IC 3-14	<ol> <li>A person who talls to the a complete of ac 4-1-14) and may be subject to civil penalties. (IC</li> </ol>	curate report as 3-9-4-16, IC 3-9	-4-17, IC 3-9-4-18)	



State Form 4606 (R14 / 10-17) Election Division (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				
	-		,	-1.5 1.00
Page _	2	of _	Ь	

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions: Direct			
GOLF TOURNEMENT	In-Kind (describe)	6.	2 -	6-9-17
Brian WAY-4APorto	Other Receipts: Interest Loan Miscellaneous (specify)	11346	11246	
Contributor's Occupation (if required)		-		
MARK KRENTZ LA Porte, N	Contributions: Direct In-Kind (describe)	100	100	6-30-17
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)	Contributions:	1		
	Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)	, ·		
Contributor's Occupation (if required)  5.	Contributions:			
9.	Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)		_	·
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$ 113-16		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM	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

\$\text{STRUCTIONS}\$: 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 _	3	of <u></u>	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	PATEOE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
MICHEANCITH MANORS BALL MICHCHU/N		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	ეთ_	200	1-24-17
AMERICAN LEGION LAPOTO	•	Polificat In-Kind Payment of Debt Returned Contribution Purpose:	25	25	3-02-17
LAPORTE MOYOR Ball LAPORTE N		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	100	K00*	3-03-17
NEW DAY FOUND ATRIN LAPORTO		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	⊋55	250	3-0317
AONEE LAND LARATO		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	ЮО	Ю	303-17
LAPATE SUCET BOSSERCU		Direct In-Kind Payment of Debt Refurned Contribution Other Purpose:	200	200	3-20+7
LAPORTO Horse : Ponu		Direct In-Kind Payment of Debt Seturned Contribution Other Purpose:	75	75	4-10-17
TOTAL OF ALL DAY	SUBTOTAL THIS PAG	ı	\$050		
TOTAL OF ALL PAC	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the		\$		



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

# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

itructions: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this ledule, 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 _	4	_of_b_	

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
LAROTE COUNTY REPUBLICAN POUTLY		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	1,000	1,00v	4-16-17
HAWKINS PONT SURD LAPORTO		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	6614	86 <sup>14</sup>	4-28
Code POSTMASTER LADOTO		Direct In-Kind Payment of Debt Beturned Contribution Other Purpose:	9.80	9.80	5-5-17
HESTON SUPPER CLUB		Direct   In-Kind   Payment of Debt   Returned Contribution   Purpose:	100 IF	100	6-7-17
ST. ANDROWS MFb. MIGHIBAN CITY		Payment of Debt Payment of Debt Returned Contribution  Other Purpose:  PO 200 - 600	768 <sup>-</sup>	768 <sup>8D</sup>	6-8-17
SILDTH DYNAMOD MILLICHY		Diffect In-Kind Payment of Debt Returned Contribution Other Purpose:	196	19260	6-8-17
Briar waf 6.c.		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	3864	3864	6917
TOTAL OF ALL DAG	SUBTOTAL THIS PAGE	E OF SCHEDULE B	\$602534		
TOTAL OF ALL PAG	ES OF SCHEDULE B ON THE (Enter total on ITEM 17a of th	LAST PAGE UNLY	\$		



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

# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

'TRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this ledule, 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_	5	of	

	1.		,		
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B	DATE OF
	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	EXPENDITURE
AMY BOYD LAROFE		Direct In-Kind Payment of Debt Returned Contribution Dother Purpose:	1176	1720	6-12-17
REBEL PAVILION LAPOTE		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	100	100	6-12-17
DANFOT JAKE PORTS		Purpose:	160 100	100	6-22-17
Ez Piders LAPATE		☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	Ю	001	G-22-17
LAPORTE U.S. BLDG TRADOC LADOTE		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	NOV.	טט	7-1-17
Dread for St. Rop. LADOTE		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	400	400	13-3-17
GO LENTAL ATHLETK DEST. NON MINS		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	380	360	9-20-17
	SUBTOTAL THIS PAGE	OF SCHEDULE B	\$ 1191.76	Me will a	
TOTAL OF ALL PAG	ES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$		



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

# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

'TRUCTIONS: Please type or print legibly !N BLACK INK all information on this schedule. For assistance in completing this nedule, 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 <u></u>	of	

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
LARITE CO. SHERIFF LAROTE LAROTE		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$500	\$ 500	10-27-17
LAPORTO H.G.  OINTS B.B. Program r		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	ю	RD	11-06-107
HESTON SUPPEZ CUB		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:  OFF CONFINATE	75 >	175	11-08-67
STEDDINH STONE LARDYE		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Officer Purpose:	ю	100	613-18
LAPORTO HS. FOORBOLL FOUNDATION		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	650	650	7-17-17
ADUSTMENT-MUDG.		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	71.90		
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
	SUBTOTAL THIS PAGE		\$1496.00	William Park	
TOTAL OF ALL PAG	ES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$9838.00		



No

State Form 4606 (R14 / 10-17) Indiana Election Division (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.

**OF** 

(CFA-4)

Summary Sheet

FILE NUMBER TOTAL PAGES IN ENTIRE CFA-4 REPORT 3

IS THIS AN AMENDMENT?	s 🗹 No	Ļ	3	
	COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Orga		name.		
	DIK TO DIKET WHO			
2. Acronym or Abbreviated Name (if any)	UN I DIII IU SIC		nmittee Telephone Number	4,
	•	(219	ن شست	
4. Mailing Address (Address where all campaign fine	ance correspondence is received.)	Check if t	his is a new address.	
1004 N. BEVERLY				
5 City State ZIP Code		6. Part	y Affiliation (if applicable)	
LAPORE IN	46350	L	2EPUBUCAV	<u> </u>
CANDIDA	TE INFORMATION (For Candidate's (	Committ	ees Only)	
7. Full Name of Candidate (Include any nickname.)		8. Part	y Affiliation or If Independe	nt Candidate
LOUN THOMAS BOY	)		ZERIBLUAN.	
9. Office Sought (Include district number, if any. Not			unty of Residence	
SHEPIFF OF LAPO	RIE OD.		A1076	
ТҮР	E OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:	_		Check one:	
Pre-Primary Pre-Election Annual Nominati	ion Other		Pre-Conv	
Final / Disbands Committee (Lines 18, 19, and 20 must be *0*.)	Outgoing Treasurer (Within ten (10) days amend Sta	etement of Or	genization.) Post-Cor	vention
12. Reporting Period (mm/dd/yy):			COLUMN A	COLUMN B
From: 1-01-18	Through: 4-18-18		This Period	Year to Date
13. Cash on hand and investments at the beginning	of this reporting period.		1287428	
14. Cash on hand and investments January 1, current	nt year.			<u> </u>
	S AND RECEIPTS			
(Note: these amounts include in-kind contributions a	nd loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)			· <del>235</del> 5	
15b. Unitemized				
15c. Add lines 15a and 15b in both columns.	SUB	TOTAL	23557	
16. Add lines 13 and 15c in Column A and lines 14 a	and 15c in Column B.	TOTAL		
EXPEND	DITURES			
(Note: These amounts include in-kind expenditures a	and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: u	se Schedule C.)		2355.∞	235500
17b. Uniternized			· · · · · · · · · · · · · · · · · · ·	
17c. Add lines 17a and 17b in both columns.	SUE	BTOTAL	235500	2355.00
18. Cash on hand and investments at close of this reporting	period (Subtract 17c from 16 in both columns.)	TOTAL	10519,28	10519,78
19. Debts OWED BY the committee (Use Schedule in	D.)		0	
20. Debts OWED TO the committee (Use Schedule	E.)		↔	
	CERTIFICATION			EFRESIGNEY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO		TRUE COS	RECT AND COMPLETE.	EEKKS OPPICE
Signature of Treasurer	Title	17,02,001	Date (mm/dd/yy)	
THOSTBOAR	Treasurer		4-16-18 AP	R 1 8 2018
Signature of Candidate (i applicable)			Date (mm/dd/yy)	†
			54 /17 12 dB	
WARNING: Any information contained in this report may not be files a fraudulent report commits a Level 6 felony. (IC 3-14-1	e copied for sale or used for any commercial purpose (-13) A person who fails to file a complete or accur	. (ルン・ソーター) ate report a	of A person who knowingly as required by the CAERKACF LA	PORTE CIRCUIT COLIFT
Campaign Finance Law commits a Class B misdemeanor, (IC 3	-14-1-14) and may be subject to civil penalties. (IC 3-9	1-4-16, IC 3	9-4-17, IC 3-9-4-18)	



Form 4606 (R14 / 10-17) Election Division (IC 3-9-5-14 State Indiana

## (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly to 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 3	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
JASON DOMBROSKI FOR SHETZI FF W. LAFAYETTE IN	SHERIFF	Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	150-	150	1-17-18
PLAY TOP JAKE FOUND ATION LAPOTE, IN	•	Purpose:	100	100	1-20
MAYORS BOLL LAPOTE, IN		Direct In-Kind Payment of Oebt Returned Contribution Other Purpose:	150	150	3-b
NEW DAY FOI NOATION DODR VILLANGE, IN		Purpose:	200	200	30r
LAPOTO FAMILY YMCA LAPOTO,IN	•	Direct . In-Kind Payment of Debt Returned Contribution Other Purpose:	100	100	3-07
LAPORTO SUCER 19 ADOLDAIL. LAPORTO, IN		Direct   In-Kind   Payment of Debt   Returned Contribution   Debt   Purpose:	2000	200	·
LAPONTO REPUBLICAN PARTY- LAPONTO IN		Detrect In-Kind Payment of Debt Returned Contribution Other Purpose:	1000	KOOO	
19-11-C3 C7/N	SUBTOTAL THIS PAGE	doubtou-dina	s 1900.		
TOTAL OF ALL P	SUBTOTAL THIS PAGES OF SCHEDULE B ON TH				
TOTAL OF ALL T	(Enter total on ITEM 17a of t	the Summary Sheet.)	\$		



Form 4606 (R14 / 10-17) Election Division (IC 3-9-5-14) State Indiana

# (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.

F	ILE NUM	BER	
	_		
Pag	re 3	of	

					<del>,</del>
	PUBLIC QUESTION	NINFORMATION			
Enter Text of Public Question.					
Type of Question: Statewide	Local				
Position: Supported Oppos	ed				1
RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)		PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
Code		☑ Direct □ In-Kind			
PAWS THAT PIOTEUT"		Payment of Debt			
LOUIM JAIL		Returned Contribution  Other		200	4.05
LAPOPE, IN		Purpose:	200	<b> </b> '\	
		K-9 Fundram			17.17.
		☑ Direct ☐ In-Kind			
Code		Payment of Debt	_		4-05
HESTON SUPPLED CLUB		Returned Contribution  Other	50	50	17-03
HESTON, IN		Purpose:			
423 1007 10		Sponsor			
Code		Direct ☐ In-Kind			
MICHIBAN CITY		Payment of Debt Returned Contribution	Att-	45	4-05
EXCHANGE CUB		Other	45	75	1 703
Mialary, In		Purpose: DINNER			
11103.0199770		Direct In-Kind		<del> </del>	
Code		Payment of Debt			
PONEER LAND		Returned Contribution			
committee		Other Purpose:	160	100	4-09
LARCEIN		ADVERTISING			
		☐ Direct ☐ In-Kind			
Code		Payment of Debt			
		Returned Contribution  Other			
ļ		Purpose:			
Code		Direct in-Kind			
		Payment of Debt Returned Contribution			
		Other			
		Purpose:	_	<b>,</b>	1
	CURTOTAL TURC DAY	SE OF SCHEDULE C	87 <b>68C</b> 45	<u> </u>	
TOTAL OF ALL 200	SUBTOTAL THIS PACES OF SCHEDULE C ON THI				
	/Enter total on ITEM 17a of t		\$		



State Form 4606 (R14 / 10-17) Indiana Election Division (IC 3-9-5-14)

Indiana Election Division (IC 3-3-3-14)

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...

IS THIS AN AMENDMENT? TYPES I

OF'

(CFA-4)

**Summary Sheet** 

FILE NUMBER

40-18-1

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE IN CRIME IS A SOUR			
1. Full Name of Committee (as on Statement of Organization)  Check if this is a new r		· n	,
COMMITTEE TO ELECT JOHNT BOYD FOT SHE		nittee Telephone Number	
2. Acronym or Abbreviated Name (if any)			
	1,(2,19		
4. Mailing Address (Address Where all Campaign Inlance Concession to Cook St.)	neck if thi	s Is a new address.	
10104 N. BEVERLY LY	100-4	Affiliation (if applicable)	
5. City, State, ZIP Code  LA DOTAL IN 46350		EPUBLICAN	
CANDIDATE INFORMATION (For Candidate's C			
		Affiliation or If Independen	t Candidate
7. Full Name of Candidate (Include any nickname.)	1 —	PUBLICAN	
JOHN THOMAS BOYD		nty of Residence	
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Cou	4 DELTE	
SUEPHER OF LABORTE COUNTY	, -/		N CANDIDATES ONLY
TYPE OF REPORT		Check one:	1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .
11. Check one:		Pre-Conv	ention
Pre-Primary Pre-Election Annual Nomination Other	lament of Orac		i
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend State	ement of Orga	inzalor.)	
12. Reporting Period (mm/dd/yy):	, A	COLUMN A This Period	COLUMN B Year to Date
From: 4-19-18 Through: 10-12-18			
13. Cash on hand and investments at the beginning of this reporting period.		10519.28	
14. Cash on hand and investments January 1, current year.			
CONTRIBUTIONS AND RECEIPTS		<b>L</b> F	
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		8313.04	8313-04
15a. Itemized (Use Schedule A.)		<u> </u>	05.50
15b. Unitemized	TOTAL	B313-24	831304
Toc. Add lines for and four condition.	TOTAL	18 B32.3Z	18832.32
16. Add lines 13 and 150 in Column A and lines 14 and 100 in Column 5.	IOIAL	10 もっと・ノム・	0032.22
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)		1127.0	898809
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		663309	B 18507
17b. Unitemized			
17C. Add lines 17a and 17b in both colorins.	TOTAL	10106.22	12.00 12
18. Cash on hand and investments at close of this reporting period (Subtrect 17c from 16 in both columns.)	TOTAL	12199,23	12199.13
19. Debts OWED BY the committee (Use Schedule D.)		€	
20. Debts OWED TO the committee (Use Schedule E.)		<del></del>	
CERTIFICATION		· F	OR OFFICE USE ONLY

	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	Date (mm/dd/yy) 10-09-18
Signature of Candidate (if applicable)		Date (mm/dd/yy)
WARNING: Any information contained in this report may files a fraudulent report commits a Level 6 felony. (IC Compaign Finance Law commits a Class B misdemeanor,	3-14-1-13) A person who fails to file a complete of accu	irate report as required by the inciana.
Campaign Finance can commiss a cides o miscements	1.0	

OCT 1 2 2018

FORFICE

CLERK OF LA PORTE CIRCUIT.



State Form 4606 (R14 / 10-17) Election Division (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 toan 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.

	F	ILE N	NUMBER	
Page	2		of 5	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	OK OTHER REGELF.	PERIOD	YEAR-TO-DATE	RECEIVED BY
GOLF OUTING	Coptributions: Direct In-Kind (describe) Other Receipts:	8114	B11 4	6-13-18
Contributor's Occupation (if regulred)	Interest Loan Miscellaneous (specify)			
15T Source Checking ACCT.	Contributions: Direct In-Kind (describe)	199		
Contributor's Occupation (il required)	Other Receipts: Interest Loan Miscellaneous (specify) COPPLET DAME DA	Andre .		
BIAR SAFET SECOND	Contributions: Direct In-Kind (describe)	₹C		
Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)	<i>,</i>		
4.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
S.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Miscellaneous (specify)	,		, ,
Contributor's Occupation (if required)	THIS PAGE OF SCHEDULE A	\$ 8213.04		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY			
(Enter total on ITEM	1 15a of the Summary Sheet.)	\$ 8313.04		



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

# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

STRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this shedule, 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	NUM	BER	
Page _	2	_ of _	<b>3</b> 5	

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
HANKING PRINTING LA PORTEIN 40350	SHERIFF	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	5 57 51 51 51 51 51 51 51 51 51 51 51 51 51		4-20-18
FRIENDS OF JIM DREDDE		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	5 0 450		5-02-18
INDIANA FARM BURBOLL INDIANDOLLS, IN 4350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$ 32.50		50418
HESTEN SUPPER aub	·	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	95 1000	150 5	5-07-18
SWING BELLES MICHATU,N 41360		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	‡ 50		6-7-18
ST. ANDREWS PROCLIEB - 500 MARINER DF MICH CITY, N 4000		Direct in-Kind Payment of Debt Returned Contribution Other Purpose:	790 <sup>20</sup>		b-7-18
Scotties MICH. CITY, N 46860		Direct In-Kind Payment of Debt	84 <u>p</u> p		67-18
TOTAL OF ALL PAG	SUBTOTAL THIS PAGE ES OF SCHEDULE B ON THE (Enter total on ITEM 17a of th	LAST PAGE ONLY	\$ 5 17.15 \$		



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

## (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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FILE NUMBER			
Page _	34 of	<b>等</b> 5	

		<del></del>		ugc	
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
Bridge WAF G.C. #39 LAROTGIN 40350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	2682 <sup>90</sup>		69-18
Ez Riders Horse/Rany LARDRE, N	·	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$ 100		6-19-18
SLICET FOODBOLL AGE LD HI SCHOOL LAROTE NAISO		Poirect   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	5 650	14	7-26-18
JGH MARKETING LAPORTO IN ABSES		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$200 pla		8-01-18
LAPOTO, NA1350		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	250°	450 <sup>52</sup>	8-15-18
American Lebion Post 83 LaPate in 41350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$ -		8-15-18
CONVIE FOR COMMISSIONER CIOFFORMUM MYCHCHUM 4636)		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	€ •		8-28-18
TOTAL OF ALL PAG	SUBTOTAL THIS PAGE ES OF SCHEDULE B ON THE I (Enter total on ITEM 17a of the	LAST PAGE ONLY	\$404690 \$561405		



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

# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

STRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this chedule, 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 _	#5 45						

				<u> </u>	'I
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	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
		Total Cor pe specially	PERIOD	YEAR-TO-DATE	1 1 1 1 1
"HOLIDAY & THE POPS"		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	600		10-04-18
ROST (REED LAROTO, N		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Support Work	DEWILL S	h mat	100-1-18
INDIANA SHERIFFASS. INDIANA DOUS, N		Payment of Debt Returned Contribution Other Purpose:	40		8-15-16
So. CEMPAL ATLICETIC ASSOC UKON MIUS IN		Direct In-Kind Payment of Debt Returned Contribution Other Purpöss:	285		9-22-18
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
- · · · · · · · · · · · · · · · · · · ·	SUBTOTAL THIS PAGE	OE SCHEDULE S	<b>.</b>	No.	•
TOTAL OF ALL DAG	\$1020-		1		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 634		