

State Form 4606 (R14 / 10-17) Indiana Election Division (IC 3-9-5-14) (CFA-4)

Summary Sheet

FILE NUMBE	R
-46-18-7	<i>0</i>
TOTAL PAGES IN ENTIRE	CFA-4 REPORT
10 PA6	ZS

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		1071	2500
COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization) Check if this is a new		,	1 0
COMMITTER TO ELECT MARIC YAGZINGS COUN	574 (LOUNCIL DI	st 3
2. Acronym or Abbreviated Name (if any)	1 ~ .	mittee Telephone Number タッタフタイ	50
4. Mailing Address (Address where all campaign finance correspondence is received.)	,	is is a new address.	
125 BOUD CIRCLE			
5. City, State, ZIP Code		Affiliation (if applicable)	
MICHIGAN CITY IN 46366		PMOCRATC	
CANDIDATE INFORMATION (For Candidate's C	•		
7. Full Name of Candidate (Include any nickname.)		Affiliation or If Independer	nt Candidate
MARIZ S. YAGELSKS	+	MOCRATC .	
9 Office Sought (Include district number, if any. Not required for exploratory committee.)	10. GOL	inty of Residence	
COUNTY COUNCIL DIST 3		a porte	
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Con	
Final / Disbands Committee (Lines 18, 19, and 20 must be '0".) Utgoing Treasurer (Within ten (10) days amend Sta	tement of Org	anization.) L Post-Cor	nvention
12. Reporting Period (mm/dd/yy):		COLUMN A This Period	COLUMN B Year to Date
From: Through:			rear to Date
13. Cash on hand and investments at the beginning of this reporting period.		8	
14. Cash on hand and investments January 1, current year.			
CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		. 🛇	0
15b. Unitemized		8	N N
15c. Add lines 15a and 15b in both columns.	TOTAL	·0.00	0.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	0.00	0.00
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		Ø	8
17b. Unitemized		0	8
17c. Add lines 17a and 17b in both columns.	TOTAL	0.00	0.00
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	0.00	0.00
19. Debts OWED BY the committee (Use Schedule D.)		ম্ব	
20. Debts OWED TO the committee (Use Schedule E.)	•	छ	
CERTIFICATION			FOR OFFICE USE ONES D
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS T	RUE, CORI		IN CLERKS OFFICE
Signature of Treasurer World World TERAS.		Date (mm/dd/yy)	
Signature of Cardinate (interpolicable)		Date (mm/dd/yy)	MAR - 1 2018
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate	. (IC 3-9-4-5	A person who knowingly	Year of charles
Comparing Figure 1 my committee a Close P mindown one (IC 2.14.1.14) and may be cubient to said parelline (IC 2.16.1.14) and may be cubient to said parelline (IC 2.16.1.14).		147 10 2 0 4 101 TIE	RK OF IA POPTE CIRCUIT COL



State Form 4606 (R14 / 10-17) 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)	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	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
(Street, number, City, State, 21r Code)	Contributions: Direct In-Kind (describe)	PERIOD .	YEAR-TO-DATE	KECEIVED BT
	Other Receipts: Interest Loan			
Contributor's Occupation (if required)	Miscellaneous (specify)			
2.	Contributions: Direct In-Kind (describe)			-
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
3.	Contributions: Direct In-Kind (describe)			·
•	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
4.	Contributions: . Direct In-Kind (describe)	•	, 1	
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
5.	Contributions: Direct In-Kind (describe)	,		
•	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$ 8		



State Form 4606 (R14 / 10-17) 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			
Page	of		

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code) 1.	Contributions: Direct In-Kind (describe) Other Receipts:	PERIOD	YEAR-TO-DATE	RECEIVED BY
	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			-
2.	Contributions: Direct In-Kind (describe)			
•	Other Receipts: Interest Loan Miscellaneous (specify)	3		
3.	Contributions: Direct In-Kind (describe)			
,	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)		•,	
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY	\$ 0.00		



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

FILE NUMBER			
Page _	<i>ل</i> ،	of <u>3</u>	

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 (mm/dd/yy) RECEIVED BY
1.	Contributions: Direct In-Kind (describe)			-
	Other Receipts: Interest Loan Miscellaneous (specify)	,	,	
2.	Contributions: Direct In-Kind (describe)	.e		
	Other Receipts: Interest Loan Miscellaneous (specify)			
3.	Contributions: Direct In-Kind (describe)			L
	Other Receipts: Interest Loan Miscellaneous (specify)			-
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	A ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	2 0		



State Form 4606 (R14 / 10-17) Indiana Election Division (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 contributior, 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 contribution, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER	
Page	of 4	

FULL MAILING ADDRESS (street, number, city, state, ZIP code) Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	
1. Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan	-U BY
Direct In-Kind (describe) Other Receipts: Interest Loan	
Other Receipts:	
☐ Interest ☐ Loan	
☐ Interest ☐ Loan	
l l l l	
2. Contributions:	
Direct	
☐ In-Kind (describe)	
Other Receipts:	
Miscellaneous (specify)	
3. Contributions:	
☐ Direct	
In-Kind (describe)	
Other Recelpts:	
Miscellaneous (specify)	
4. Contributions:	
Direct	
☐ In-Kind (describe)	
Other Receipts:	
Interest Loan	
☐ Miscellaneous (specify)	
5. Contributions:	•
Direct	
In-Kind (describe)	
Other Receipts:	
Interest Loan	
Miscellaneous (specify)	
SUBTOTAL THIS PAGE OF SCHEDULE A \$ 0.00	
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.) \$	



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

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: 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 document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities 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 candidate's, legislative caucus, and receipts with 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).

FILE NUMBER			
Page)	of	

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS	OR OTHER RECEIPT	AMOUNT THIS	CUMULATIVE	RECEIVED BY
(street, number, city, state, ZIP code)	Contributions:	PERIOD	YEAR-TO-DATE	
•	Direct			
	n-Kind (describe)			
	Other Receipts:			
	Interest Loan Miscellaneous (specify)			
	Miscellaneous (specify)			
	0-1-1-1-1			
2	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
I	Interest Loan			
	Miscellaneous (specify)	<u>`</u>		
3.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			•
	Miscellaneous (specify)			
4.	Contributions:		!	
	Direct In-Kind (describe)			
	an rank (bosonboy			
,	Other Receipts:	1		
	☐ Interest ☐ Loan			
	Miscellaneous (specify)			
5.	Contributions:			
	Direct In-Kind (describe)	:		
	I II-VIIIO (Gescribe)			
	Other Receipts:	1		
	Interest Loan			
I	Miscellaneous (specify)		1	
1				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE		\x		
L Company of the Comp	f 15a of the Summary Sheet.)	\$ ()		



State Form 4606 (R14 / 10-17) 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 _		_of_6_	:		

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 (mm/dd/yy)
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code	•	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		٠.	
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:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG		\$ 0.00		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of t		\$ \$		



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

(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.

FIL	E NUME	BER	
Page _	+	of	

		Page	of 				
PUBLIC QUESTION INFORMATION Enter Text of Public Question.							
Lines (Sat of) abile dessile	'						
Type of Question: Statewide Local							
Position: Supported Opposed	TYPE OF EXPENSITION	COLUMN A COLUMN B					
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code) RECIPIENT'S C		COLUMN A COLUMN B MOUNT THIS CUMULATIVE PERIOD YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)				
Code	☐ Direct ☐ in-Kind☐ Payment of Debt						
	Returned Contribution						
	Other Purpose:		-				
Code	☐ Direct ☐ In-Kind ☐ Payment of Debt						
	Returned Contribution						
	OtherPurpose:						
			-				
Code	☐ Direct ☐ In-Kind ☐ Payment of Debt						
	Returned Contribution Other						
·	Purpose:						
	t Direct In-Kind						
	Payment of Debt Returned Contribution						
	Other						
	Purpose:						
Code	☐ Direct ☐ In-Kind	-					
	Payment of Debt Returned Contribution						
	Other	,					
Code	Direct In-Kind Payment of Debt		-				
	Returned Contribution Other						
	Purpose:						
SURTO	TAL THIS PAGE OF SCHEDULE C \$	0.00	1				
TOTAL OF ALL PAGES OF SCHED	ULE C ON THE LAST PAGE ONLY	0.00					



State Form 4606 (R14 / 10-17) 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 _)	of&	

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	y, state, ZIP code) (street, number, city, state, ZIP code)		(mm/dd/yy)	YEAR-TO-DATE	PERIOD
				-	
LENDER'S OCCUPATION:					
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LENDER'S OCCUPATION:					
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LENDER'S OCCUPATION:					
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		· · · · · · · · · · · · · · · · · · ·		F SCHEDULE D	\$ 0.00
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.)				s X	



(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						
Page	1	of				

	<u> </u>				<u>, </u>
BORROWER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	CO-SIGNER'S NAME AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	ORIGINAL AMOUNT	DATE DEBT INCURRED (mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
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I					
			AL THIS PAGE OF		\$ 0.00
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summary Sheet.)					2



INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For

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

(CFA-4)

Summary Sheet
FILE NUMBER

assistance in completing this form, see instructions on the reverse side.	TO	OTAL PAGES IN ENT	RE CFA-4 REPORT
IS THIS AN AMENDMENT? Yes X No		. g.	
COMMITTEE INFORMATION	• .		
	nomo		•
1. Full Name of Committee (as on Statement of Organization) Check if this is a new r	name, ,		*
2. Acronym or Abbreviated Name (if any)	3. Comm	ittee Telephone Number	
•	11910	<u>1) 898 137</u>	}
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check If this	is a new address.	
125 BOYD CIRCLE			
5. City, State, ZIP Code		Affiliation (if applicable)	
MUHICAN CITY IN 46360		MUCKAET	
CANDIDATE INFORMATION (For Candidate's C			4 Constitutes
7. Full Name of Candidate (Include any nickname.)	4	Affiliation or If Independer	it Candidate
Mark SYAGELSKS		MOCKAET	
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	11. \	ty of Residence	
COUNTY COUNCIL DIST. 3	VV.	CONVENTION	N CANDIDATES ONLY
', TYPE OF REPORT	. * > > .	Check one:	W CANDIDATES ONE
11. Check one:	•	Check one:	ention
Pre-Primary Pre-Election Annual Nomination Other		 	
Final / Disbands Committee (Lines 18, 19, and 20 must be *0".) Utgoing Treasurer (Within ten (10) days amend State	tement of Organ	vization.)	Veridori
12. Reporting Period (mm/dd/yy): - From: ADOLL 14 2018 .Through: Octo BQ2 19th 20	ιg	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and Investments at the beginning of this reporting period.		(0.	
14. Cash on hand and investments at the beginning of the special part of the segments.			7200
CONTRIBUTIONS AND RECEIPTS		I I	
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		1500,00	1500.00
15b. Unitemized		10	. 0
15c. Add lines 15a and 15b in both columns.	TOTAL	1200.00	1500.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	1500.00	1500.00
EXPENDITURES	<u> </u>		
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	1	780,00	780,00
17b. Unitemized		E Z 1	R
	TOTAL	78000	780,00
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	720°0	720.00
19. Debts OWED BY the committee (Use Schedule D.)		8	
20. Debts OWED TO the committee (Use Schedule E.)		Ø	
ZO. Debis OVED TO the committee (Osta Carrette Ly	*		

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, O	ORRECT AND COMPLETE.	IN CLERKS OFFICE
Signature of Treasurer Title Self	Date (mm/dd/yy)	OCT 3 1 2018
Signature of Candidate (if applicable)	Date (mm/dd/yy) 10 - 12 - 18	001 3 1 2016
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9 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 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	If as tedexed by the infraria 1	POPULLE CIRCUIT COLIDE

CERTIFICATION

EOR OFFICE USE ONE IN CLERKS OFFICE



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
Page of

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/ldd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
MARK YAGELSICS 175 BOJD CIRCLES MICHIGANCITY IN	Contributions: Direct In-Kind (describe)	,		8-15-18
105 BOJD CIRCLE		100000	1000.00	000-
MICHIGADUTY IN	Other Receipts: Interest Loan	, 0 00.0 0		
46360	Miscellaneous (specify)	, , , , , , ,	:	
Contributor's Occupation (il required)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	• • • •	•	
2.	Contributions: Direct In-Kind (describe)			
	I I I I I I I I I I I I I I I I I I I		S 230 547	
	Other Receipts:	•		garanter in a second
	Miscellaneous (specify)			
Contributor's Occupation (if required)				<u> </u>
3.	Contributions: Direct In-Kind (describe)	ers a		, -
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State Form 4606 (R14 / 10-17) 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).

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

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Réceipts

INSTRUCTIONS: 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 document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, 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, relunds, rebates, returns of deposit, proceeds from sales, inderest 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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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 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.

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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.

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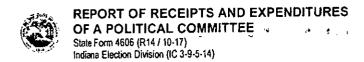
OF A POLITICAL COMMITTEE
State Form 4606 (R14 / 10-17)
Indiana Election Division (IC 3-9-5-14)

(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.

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(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.

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