

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

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(CFA-4) Summary Sheet

FILE NUMBER

1018-02

TOTAL PAGES IN ENTIRE CFA-4 REPORT

2

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)	name.		
FRIENDS OF JOHN ESPAR COMMITTEE		n	
2. Acronym or Abbreviated Name (if any)	3. Commi	ittee Telephone Number	
	(219	, 874-2900	
4. Mailing Address (Address where all campaign finance correspondence is received.) 501 PINE STREET	Check if this	is a new address.	
5. City, State, ZIP Code	6. Party A	Affiliation (if applicable)	
MICHIGAN CITY, IN 46360	DEMC	CRAT	
CANDIDATE INFORMATION (For Candidate's Co	ommittee	s Only)	
7. Full Name of Candidate (Include any nickname.)	8. Party A	Affiliation or If Independer	nt Candidate
JOHN M. ESPAR	DEMO	CRAT	
9. Office Sought (Include district number, if any. Not required for exploratory committee.) LA PORTE COUNTY PROSECUTING ATTORNEY	10. Count	ty of Residence PRTE	
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conv	ention
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend State	ement of Organi	ization.) Dest-Con	vention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: 01/01/17 Through: 12/31/17	-	This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		1,536.97	
14. Cash on hand and investments January 1, current year.			1,536.97
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)			
15b. Unitemized			0.00
	TOTAL	0.00	0.00
10.7100 11100 1210 1210 1210 1210 1210 1210	TOTAL	1,536.97	1,536.97
EXPENDITURES			~~
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			
17b. Unitemized			
	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	1,536.97	1,536.97
19. Debts OWED BY the committee (Use Schedule D.)		33,000.00	
20. Debts OWED TO the committee (Use Schedule E.)			
CERTIFICATION		F	OR OFFICE USE ONLY
OLIVINOS DE LA CALLANDA DEL CALLANDA DEL CALLANDA DE LA CALLANDA DE LA CALLANDA DEL CALLANDA D		OT AND COURSETS TO	T T. F D

	CERTIFICATION		FOR OFFICE USE ONLY
	TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	S TRUE, CORRECT AND COMPLETE. Date (mm/dd/lv)	I L E D IN CLERKS OFFICE \
Signature of Treasurer	TREASURER	01/03/18	
Signature of Candidate (if applicable)		Date (mm/dd/fy)	JAN 8 2018
WARNING: Any information contained in this report may files fraudulent report commits a Level 6 felony. (IC Campaign Finance Law commits a Class B misdemeanor	3-14-1-13) A person who fails to file a complete or acc	curate report as required by the Indianta.	Konsudelishik
Campaign Finance Law Commits a Class & misdefreahor	(10 3-14-1-14) and may be subject to divil perialities. (10 t		K OF LA PORTE CIRCUIT COUP



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	2	of	2		

		AMOUNT			
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)	(street, number, city, state, ZIP code)	NATURE OF DEBT	(mm/dd/yy)	YEAR-TO-DATE	PERIOD
JOHN M. ESPAR 501 PINE STREET MICHIGAN CITY, IN 46360		\$8,000.00	-11/15/2013	\$0.00	\$8,000.00
LENDER'S OCCUPATION: CANDIDATE		CASH LOAN	1 17 10/2010	Ψ0.00	\$5,555.55
JOHN M. ESPAR 501 PINE STREET MICHIGAN CITY, IN 46360		\$10,000.00	02/27/2014	\$0.00	\$10,000.00
LENDER'S OCCUPATION: CANDIDATE		CASH LOAN			
JOHN M. ESPAR 501 PINE STREET MICHIGAN CITY, IN 46360		\$10,000.00	03/31/2014	\$0.00	\$10,000.00
LENDER'S OCCUPATION: CANDIDATE		CASH LOAN			
JOHN M. ESPAR 501 PINE STREET MICHIGAN CITY, IN 46360		\$5,000.00	04/29/2014	\$0.00	\$5,000.00
LENDERS OCCUPATION: CANDIDATE		CASH LOAN			
LENDER'S OCCUPATION:					
ELIBERTO OCCUPATION.					
·			_		
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:		SUBTOTA	L AL THIS PAGE O	F SCHEDULE D	\$ 33,000.00
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.)					\$ 33,000.00



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 V No

(CFA-4) Summary Sheet

FILE NUMBER

L 46-18-02 F

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization) Check if this is a new r	name.		
FRIENDS OF JOHN ESPAR COMMITTEE			
2. Acronym or Abbreviated Name (if any) 3. Committee Telephone Number 7. 219 3874-2900			
Mailing Address (Address where all campaign finance correspondence is received.)		is a new address.	
501 PINE STREET	AIRCK II GIIS	is a new address.	
5. City, State, ZIP Code		Affiliation (if applicable)	
MICHIGAN CITY, IN 46360	DEMO		
CANDIDATE INFORMATION (For Candidate's C	ommittee	s Only)	
7. Full Name of Candidate (Include any nickname.)	1 '	Affiliation or If Independer	nt Candidate
JOHN M. ESPAR	DEMO	OCRAT	
9. Office Sought (Include district number, if any. Not required for exploratory committee.) LA PORTE COUNTY PROSECUTING ATTORNEY	10. Count LA PC	ly of Residence DRTE	
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
✓ Pre-Primary ☐ Pre-Election ☐ Annual ☐ Nomination ☐ Other		Pre-Conv	vention .
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend State	ement of Organi	zation.) Dost-Con	vention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: 01/01/18 Through: 04/13/18		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		This Period 1,536.97	
Cash on hand and investments at the beginning of this reporting period. Cash on hand and investments January 1, current year.			Year to Date 1,536.97
13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments January 1, current year.			
Cash on hand and investments at the beginning of this reporting period. 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.)		1,536.97	1,536.97
13. Cash on hand and investments at the beginning of this reporting period. 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.)		1,536.97 37,197.52	1,536.97
13. Cash on hand and investments at the beginning of this reporting period. 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.) 15b. Unitemized		1,536.97 37,197.52 260.00	1,536.97 37,197.52 260.00
13. Cash on hand and investments at the beginning of this reporting period. 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.) 15b. Unitemized	TOTAL	1,536.97 37,197.52	1,536.97
13. Cash on hand and investments at the beginning of this reporting period. 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.) 15b. Unitemized 15c. Add lines 15a and 15b in both columns.	TOTAL	1,536.97 37,197.52 260.00	1,536.97 37,197.52 260.00
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13. Cash on hand and investments at the beginning of this reporting period. 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.) 15b. Unitemized 15c. Add lines 15a and 15b in both columns. SUB1 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.		1,536.97 37,197.52 260.00 37,457.52	1,536.97 37,197.52 260.00 37,457.52
13. Cash on hand and investments at the beginning of this reporting period. 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.) 15b. Unitemized 15c. Add lines 15a and 15b in both columns. SUBT 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.		1,536.97 37,197.52 260.00 37,457.52	1,536.97 37,197.52 260.00 37,457.52
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13. Cash on hand and investments at the beginning of this reporting period. 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.) 15b. Unitemized 15c. Add lines 15a and 15b in both columns. SUBT 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.) 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17b. Unitemized	TOTAL	1,536.97 37,197.52 260.00 37,457.52 38,994.49 13,910.15 2,263.78	1,536.97 37,197.52 260.00 37,457.52 38,994.49 13,910.15 2,263.78
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	CERTIFICATION	FOR OFFICE USE OF DY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT.	TO THE BEST OF MY KNOWLEDGE AND BELIEF IT	IS TRUE, CORRECT AND COMPLETE THE CLERKS OFFICE
Signature of Treasure	Title TREASURER	04/18/18
Signature discandidate (if applicable)		Date (mm/dayy) APR 2 0 2018
WARNING: Any information contained in his report may rifles a fraudulent report commits a Level 6 felony. (IC 3 Campaign Finance Law commits a Class B misdemeanor,	-14-1-13) A person who fails to file a complete or a	courate report as required by the Indiana Kana Methodisch



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_	2	of	6	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. JOHN M. ESPAR 112 GARDEN TRAIL MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)			03/01/18
. Contributor's Occupation (if required) CANDIDATE	Other Receipts: Interest Loan Miscellaneous (specify)	\$29,000.00	\$29,000.00	CANDIDATE
2 JOHN M. ESPAR 112 GARDEN TRAIL MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe) VARIOUS EXPENSES PAID			VARIOUS
Contributor's Occupation (if required) CANDIDATE	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,447.52	\$1,447.52	CANDIDATE
3 JAMES & LAUREN ARNOLD 5698 W. JOHNSON RD. LA PORTE, IN 46350	Contributions: ☑ Direct ☐ In-Kind (describe)	****		02/27/18
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	TREASURER
4 CHARLES OBERLIE 200 AUTUMN TRAIL MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)			02/27/18
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	TREASURER
5. STEPHANIE OBERLIE 405 E. LAKEFRONT DR. BEVERLY SHORES, IN 46301	Contributions: Direct In-Kind (describe)			2/27/18
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,000.00	\$1,000.00	TREASURER
	THIS PAGE OF SCHEDULE A	\$ 31,897.52		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$		



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 _	3	of	6	

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)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1. EDWARD ROY	Contributions: Direct In-Kind (describe)			04/10/18
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$300.00	\$300.00	TREASURER
2 RICHARD SCHAEFER	Contributions:			
402 HENDRICKS ST. MICHIGAN CITY, IN 46360	☑ Direct ☐ In-Kind (describe) VARIOUS EXPENSES PAID	\$200.00	#200 00	02/27/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	TREASURER
Contributor's Occupation (if required)				
3. EDWARD ZAKNOEN	Contributions: Direct In-Kind (describe)		*****	04/10/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	TREASURER
Contributor's Occupation (if required)	Contributions:			
4 BRUNCH FUNDRAISER GALVESTON STEAK HOUSE TICKETS \$20 PER PERSON	Direct In-Kind (describe)			03/25/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$4,600.00	\$4,600.00	TREASURER
Contributor's Occupation (if required)				
S.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$ 5,300.00		
TOTAL OF ALL PAGES OF SCHEDULE / (Enter total on ITEM	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$ 37,197.52		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE	NUMBI	ĒR	
Page_	4	_ of	6	_

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
Code F ADMIT ONE PRODUCTIONS 15331 BARRANCA PARKWAY IRVINE, CA 92618	MARKETING	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: FUNDRAISER TICKETS	\$177.27	\$177.27	VARIOUS
Code A ARADISE 56 LINCOLNWAY, SUITE 1 VALPARAISO, IN 46383	MARKETING	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: ADVERTISING SERVICES	\$3,000.00	\$3,000.00	03/27/18
AT&T P.O. BOX 5014 CAROL STREAM, IL 60197	UTILITY	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: TELEPHONE SERVICE	\$157.75	\$157.75	03/28/18
GERARD MEDIA 685 E. 1675 N. MICHIGAN CITY, IN 46360	RADIO STATION	Direct In-Kind Payment of Detx Returned Contribution Other Purpose:	\$1,695.00	\$1,695.00	04/06/18
Code O INTUIT	SOFTWARE	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: SOFTWARE	\$259.00	\$259.00	04/02/18
JOHN M. ESPAR 112 GARDEN TRAIL	CANDIDATE	Direct In-Kind Payment of Debt Returned Contribution Other	\$380.25	\$380.25	VARIOUS
MICHIGAN CITY, IN 46360	PROSECUTING ATTORNEY	Purpose: SUPPLIES REIMBURSEMENT			
MICH CITY CHAMBER OF COMMERCE 200 E. MICHIGAN BLVD.	CHAMBER OF COMMERCE	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: ANNUAL DINNER	\$600.00	\$600.00	02/22/18
	SUBTOTAL THIS PAG	SE OF SCHEDULE B	\$ 6,269.27		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of to		\$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER			
	· <u> </u>		
Page _	5 of	6	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE COLUM		COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(ottoot, mainton, only, otato, En local)	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
MICH CITY PARKS DEPT 100 E MICHIGAN BLVD MICHIGAN CITY, IN 46360		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: HALL RENTAL	\$395.00	\$395.00	03/21/18
PAWS THAT PROTECT 1201 E. MICHIGAN BLVD. MICHIGAN CITY, IN 46360	CHARITY	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: CHARITY EVENT	\$400.00	\$400.00	04/10/18
ANDREW SPERLING 2407 DUNELAND BEACH DR MICHIGAN CITY, IN 46360	MARKETING	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: SIGNS & SHIRTS	\$3,904.73	\$3,904.73	VARIOUS
Code A WCOE 1700 W. LINCOLNWAY LA PORTE, IN 46350	RADIO STATION	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: COMMERCIALS	\$1,971.15	\$1,971.15	04/08/18
Code A WEFM 1201 SPRINGLAND AVE MICHIGAN CITY, IN 46360	RADIO STATION	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: COMMERCIALS	\$970.00	\$970.00	04/08/18
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		\$ 7,640.88		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17s of the Summary Sheet)					



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 NUMBE	R
	-74	
Page _	<u>6</u> of _	6_

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS (street, number, city state ZiP code)	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any) street number city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT • INCURRED (mm-dd yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
JOHN M. ESPAR 501 PINE STREET MICHIGAN CITY, IN 46360		\$8,000.00	11/15/2013	\$0.00	\$8,000.00
LENGER'S OCCUPATION: CANDIDATE		CASH LOAN			
JOHN M. ESPAR 501 PINE STREET MICHIGAN CITY, IN 46360	-	\$10,000.00	02/27/2014	\$0.00	\$10,000.00
LENGERS COCUPATION: CANDIDATE		CASH LOAN			
JOHN M. ESPAR 501 PINE STREET MICHIGAN CITY, IN 46360		\$10,000.00	03/31/2014	\$0.00	\$10,000.00
LENDERS OCCUPATION: CANDIDATE		CASH LOAN			
JOHN M. ESPAR 501 PINE STREET MICHIGAN CITY, IN 46360		\$5,000.00	04/29/2014	\$0.00	\$5,000.00
LENDER'S COCUPATION CANDIDATE		CASH LOAN			
LENDER'S COCUPATION				-	
		J			
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION		SUBTOTA	L THIS PAGE O	F SCHEDULE D	\$ 33,000.00
	TOTAL OF ALI	PAGES OF SCHEDUL		ST PAGE ONLY	\$ 33,000.00



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

(CFA-4) Summary Sheet

FILE NUMBER

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

9

COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization) Check if this is a new note of the statement of Organization Check if this is a new note of the statement of Organization Check if this is a new note of the statement of Organization Check if this is a new note of the statement of Organization Check if this is a new note of the statement of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if this is a new note of Organization Check if the organization	iame.			
2. Acronym or Abbreviated Name (if any)	3. Com (21	mittee Telephone Nur 9) 874-2900	nber	
4. Mailing Address (Address where all campaign finance correspondence is received.) 501 PINE ST.	heck if th	is is a new address.		
5. City, State, ZIP Code MICHIGAN CITY, IN 46360		Affiliation (if applicab OCRAT	ile)	
CANDIDATE INFORMATION (For Candidate's Co	ommitte	ees Only)		
7. Full Name of Candidate (Include any nickname.)	8. Party	Affiliation or If Indepe	endent Ca	andidate
JOHN M. ESPAR	DEM	IOCRAT		
9. Office Sought (Include district number, if any. Not required for exploratory committee.) LA PORTE COUNTY PROSECUTING ATTORNEY	ľ	unty of Residence ORTE		
TYPE OF REPORT		CONVE	итіои с	ANDIDATES ONLY
11. Check one: Pre-Primary Pre-Election Annual Nomination Other Final / Disbands Committee (Lines 18, 19, and 20 must be '0".) Outgoing Treasurer (Within ten (10) days amend State	ement of Org		<i>ne:</i> -Conventi t-Conven	1
12. Reporting Period (mm/dd/yy):		COLUMN A		COLUMN B
From: 04/14/18 Through: 07/26/18		This Period		Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		22,820	.56	
14. Cash on hand and investments January 1, current year.				1,536.97
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				22.77.42
15a. Itemized (Use Schedule A.)		28,576		65,774.26
15b. Unitemized		925		1,185.00
	OTAL	29,501		66,959.26
	TOTAL	52,322	.30	68,496.23
EXPENDITURES	_			
(Note: These amounts include in-kind expenditures and loan repayments.)		54.045		20.000.00
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		51,617	- 1 -	66,883.06
17b. Unitemized	TOTAL	705		1,613.17
	TOTAL	52,322	0.00	68,496.23
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL			0.00
19. Debts OWED BY the committee (Use Schedule D.)			0.00	
20. Debts OWED TO the committee (Use Schedule E.)		<u> </u>	.00	
CERTIFICATION			CER!	S FOFFISE BILLY
CEATIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TO Signature of Treasurer Signature of Candidate (if applicable) TREASURER Signature of Candidate (if applicable)		Date (mm/dd/yy)	-	7 2018
		7/24/16	- 2	
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	(it. 3-9-4-5) te report a:	A person who knowingly s required by 1948 RM20	F LA PORT	E CIRCUIT COURT

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)



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	2	of	9	

CONTRIBUTOR'S FULL NAME AND OCCUPATION 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)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1- John M. Espar	Contributions:		!	
501 Pine St.	In-Kind (describe)			04/17/18
Michigan City, IN 46360	Fundraiser Food			
	Other Receipts:	\$750.00		
	Interest Loan			
	Miscellaneous (specify)			Candidate
Contributor's Occupation (If required) Candidate/Attorney				
2 John M. Espar	Contributions: Direct			
501 Pine St.	In-Kind (describe)			04/18/18
Michigan City, IN 46360	Mailer Postage			
	Other Receipts:	\$1,187.50		
	☐ Interest ☐ Loan			
	Miscellaneous (specify)			Candidate
Contributor's Occupation (if required) Candidate/Attorney				
3. John M. Espar	Contributions: Direct			
501 Pine St.	In-Kind (describe)			07/20/18
Michigan City, IN 46360	III-I (III (UCSC/IDC)			
	Other Receipts:	\$20,448.28	\$52,833.30	
	☐ Interest ☐ Loan			
	Miscellaneous (specify)			Candidate
Contributor's Occupation (if required) Candidate/Attorney	Convert loan to conribution			
4 Galveston Steak House	Contributions:			
10 Commerce Square	✓ In-Kind (describe)			04/15/18
Michigan City, IN 46360	Fundraiser Food			
	Other Receipts:	\$1,250.00	\$1,250.00	
	☐ Interest ☐ Loan			
	Miscellaneous (specify)			Candidate
Contributor's Occupation (if required) Restaurant				
5. Stephanie Oberlie	Contributions:			
405 E. Lakefront Dr.	☐ Direct ☐ In-Kind (describe)			05/02/18
Beverly Shores, IN 46301	Mailer Postage			
·	Other Receipts:	\$2,160.96	\$3,160.96	
<u> </u>	Interest Loan			
	Miscellaneous (specify)			Treasurer
Contributor's Occupation (if required) Finance				
i e	THIS PAGE OF SCHEDULE A	\$ 25,796.74		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$		
(Enter total on ITEM	1 15a of the Summary Sheet.)	<u> </u>		



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	3	of	9		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
Silver Palace Fundraiser Tickets \$20 per person	Contributions: Direct In-Kind (describe)			04/17/18
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$2,480.00	\$2,480.00	Treasurer
Larry Zimmer & Ted Perzanowski 110 Elmwood Dr. Michigan City, IN 46360	Contributions: ☑ Direct ☐ In-Kind (describe)			04/30/18
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$300.00	\$300.00	Candidate
3. Jim & Lauren Arnold 5698 W. Johnson Rd. La Porte, IN 46350	Contributions: Direct In-Kind (describe)			
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)		\$200.00	
Charles Oberlie 200 Autumn Trail Michigan City, IN 46360	Contributions: Direct In-Kind (describe)		2050.00	
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)		\$250.00	
5. Edward Roy 101 Miller St. Rankin, PA	Contributions: Direct In-Kind (describe)		#200 00	
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)		\$300.00	
	THIS PAGE OF SCHEDULE A	\$ 2,780.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet.)	\$		



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, rebailes, 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	4	of	9	

CONTRIBUTOR'S FULL NAME AND OCCUPATION 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)	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
Richard Schaefer 402 Hendricks St.	Direct			
Michigan City, IN 46360	In-Kind (describe)			
			\$200.00	
	Other Receipts:		\$200.00	
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
² Galveston Steak House Fundraiser	Contributions:			
Tickers \$20 per person	☐ In-Kind (describe)			
	In-Kind (describe)	:		
	Other Receipts:		\$4,600.00	
	Interest Loan			
	Miscellaneous (specify)			
Contributor's Occupation (il required)				-
3. Edward Zaknoun	Contributions: Direct			
321 Benton St. Michigan City, IN 46360	In-Kind (describe)			
who high city, he 40000				
	Other Receipts:		\$200.00	
i	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			
	Initiasellaticous (opeany)			
Contributor's Occupation (if required)	Contributions:			
•	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
5.	Contributions:			
	Direct In-Kind (describe)			
	I HEKING (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)]	
Contributor's Occupation (d required)				
•	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$ 28,576.74		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER				
Page _	5	_ of	9	_

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)
Aradise 56 Lincolnway, Suite 1 Valparaiso, IN 46383	Marketing	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Creative Design	\$5,315.00	\$8,315.00	06/05/18
Code O AT&T P.O. Box 5014 Carol Stream, IL 60197	Telephone Co.	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Office Phone	\$161.76		04/18/18
AT&T P.O. Box 5014 Carol Stream, IL 60197	Telephone Co.	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Office Phone	\$161.34	\$638.60	05/12/18
Buycoolpromotions.com 623 State St. La Porte, IN 46350	Media	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose: Radio Advertising	\$300.00	\$300.00	05/19/18
Code O Costco 1310 E. 79th Ave. Merrillville, IN 46410	Department Store	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Supplies	\$281.60	\$281.60	05/03/18
Fast Color Printer, Inc. 111 2nd Ave. NE #900 St Petersburg, FL 33701	Printer	☑ Direct	\$1,187.50		04/20/18
Code A Fast Color Printer, Inc. 111 2nd Ave. NE #900 St. Petersburg, FŁ 33701	Printer	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Printing	\$2,251.00		04/30/18
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 9,658.20		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE	NUMB	ER	
Page _	6	_ of	9	

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)
Fast Color Printer, Inc. 111 2nd Ave. NE #900 St. Petersburg, FL	Printer	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Printing	\$26.00	\$3,464.50	04/30/18
Galveston Steak House 10 Commerce Square Michigan City, IN 46360	Restaurant	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Fundraiser Food	\$1,250.00		04/15/18
Galveston Steak House 10 Commerce Square Michigan City, IN 46360	Restaurant	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Fundraiser Expenses	\$45.77	\$1,295.77	04/16/18
John M. Espar 501 Pine St. Michigan City, IN 46360	Candidate	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Reimburse Fundraiser Food	\$750.00		04/17/18
John M. Espar 501 Pine St. Michigan City, IN 46360	Candidate	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose: Reimburse Postage	\$1,187.50		04/18/18
John M. Espar 501 Pine St. Michigan City, IN 46360	Candidate	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Loan Repayment	\$33,000.00	\$35,317.75	07/20/18
News-Dispatch 422 Franklin St., Suite B Michigan City, IN 46360	Newspaper	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Advertising	\$2,013.58	\$2,013.58	05/02/18
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 38,272.85		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER				
Page _	7	_ of	9	

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 A Signrocket 340 Broadway Ave. St. Paul Park, MN 55071	Marketing	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Signs	\$380.00	\$380.00	04/27/18
Andrew Sperling 2407 Duneland Beach Dr. Michigan City, IN 46360	Marketing	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Signs & Shirts	\$106.89	\$4,011.62	04/18/18
Stephanie Oberlie 405 E. Lakefront Dr. Beverly Shores, IN 46301	Finance	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Mailer Postage	\$2,160.96	\$2,160.96	05/02/18
Code F Stephen Alt	Police Officer	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Event Security	\$140.00	\$140.00	05/10/18
Code A WCOE 1700 W. Lincolnway La Porte, IN 46350	Radio Station	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Advertising	\$598.40	\$2,569.55	05/15/18/
Code A WEFM 1201 Springland Ave. Michigan City, IN 46360	Radio Station	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Advertising	\$300.00	\$1,270.00	05/15/18
Admit One Productions 15331 Barranca Pkwy. Irvine, CA 92618	Printer	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Fundraiser Tickets		\$177.27	
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 3,686.25		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER				
			_	
Page _	8	_ of	9	

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)
AIA Services LLC 8148 Solutions Center Chicago, IL 60677	Marketing	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Rack Cards		\$ 506.11	
Gerard Media 685 E. 1675 N. Michigan City, IN 46360	Radio Station	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Advertising		\$1,695.00	
Holly's 3705 S. Franklin St. Michigan City, IN 46360	Restaurant	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Committee Meeting		\$218.80	
Junior Achievement 613 Franklin St. Michigan City, IN 46360	Community Organization	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Contribution		\$200.00	
Code O Labels and Lists, Inc.	Marketing	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Mailing List		\$272.95	
Mich. City Chamber of Commerce 200 E. Michigan Blvd. Michigan City, IN 46360	Community Organization	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Annual Dinner		\$600.00	
Code O Mich. City Parks Department 100 E. Michigan Blvd. Michigan City, IN 46360	Banquet Hall	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Hall Rental		\$395.00	
TOTAL OF ALL PA	SUBTOTAL THIS PAC AGES OF SCHEDULE B ON THI (Enter total on ITEM 17a of t	E LAST PAGE ONLY	\$ 0.00 \$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER					
Page _	9	_ of	9		

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)
Paws That Protect 1201 E. Michigan Blvd. Michigan City, IN 46360	Community Organization	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Contribution		\$400.00	
Polis, Inc. 10 Ware St. Cambridge, MA 02138	Mapping Service	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Maps		\$259.00	
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 PAGE OF SCHEDULE B				
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)		\$ 51,617.30			



State Form 4608 (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? 🕱 Y

Yes 🗆

OF

(CFA-4)

Summary Sheet

FILE NUMBER

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

2

1. Full Name of Committee (as on Statement of Organization)	COMMITTEE INFORMATION			
2. Acronym or Abstraction Name (if any) 3. Committee Telephone Number (2/9 874-2900) 4. Mailling Acdress (Address where all campaign finance correspondence is received.) 5. CIP, State, 12 Code A. Mailling Address (Address where all campaign finance correspondence is received.) 5. CIP, State, 12 Code A. Mailling Address (Address where all campaign finance correspondence is received.) 5. CIP, State, 12 Code A. Mailling Address (Address where all campaign finance correspondence is received.) 5. CIP, State, 12 Code A. Mailling Address (Address where all campaign finance correspondence is received.) 5. City, State, 12 Code A. Mailling Address (Address where all campaign finance correspondence is received.) 7. Full Name of Candidate (include any nickname) A. Part Committees (Include any nickname) 5. City, State, 12 Code A. Part Affiliation (if applicable) A. Part Affiliation or it Independent Candidate D. County of Residence A. Part County of Re		name		
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To: La Porte County Election Board

From: John J. Schaefer, Treasurer

Friends of John Espar Committee

Date: October 9, 2018

After his defeat in the May, 2018 primary election, John Espar's campaign committee was left with a number of large campaign yard signs. Mr. Espar's daughter is now a candidate for the same office, as a member of the opposite party. In an effort to support his daughter, and assuming his daughter would be amenable to receiving his support, Mr. Espar placed 23 of his signs in various locations, with the permission of the owners of the properties, on Sunday, October 7, 2018. (Please note that the signs did not indicate a political party or mention Mr. Espar's first name.) Late in the evening of October 7, Mr. Espar was notified by his daughter that her campaign committee refused to accept the signs. On the next day, Mr. Espar immediately removed the signs.

It was Mr. Espar's intent to file an amended campaign finance report to indicate the in-kind contribution of the signs to his daughter's campaign committee. Since his daughter's committee refused the contribution, and since the signs were removed within a day of their placement, we are filing an amended campaign finance report to change the date of the dissolution of Mr. Espar's committee to October 8, 2018, and to disclose these events. The amended report contains no changes to previously reported financial information.

Please accept this letter as a part of the amended campaign finance report for the Friends of John Espar Committee. The entire amended report consists of the front page of the CFA-4 and this letter.

If the Election Board does not feel that this action is sufficient in this matter, we respectfully request that you advise us as to any additional steps we should take to be in complete compliance with the campaign finance rules.

John J. Schaefer, Treasure

Friends of John Espar Committee