

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

Summary Sheet FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT? Yes V NO	L_		
COMMITTEE INFORMATION			
	name		<u>;</u>
1. Full Name of Committee (as on Statement of Organization)	name.		
2. Acronym or Abbreviated Name (if any)		mittee Telephone Number	.41
	(21		
4. Mailing Address (Address where all campaign finance correspondence is received.) 814 JEFFERSON AVE	Check if th		Andrew Comments
5. City, State, ZIP Code	,	Affiliation (if applicable)	Y - we with
ĽAPORTE, IN 46350	REP	UBLICAN 🛴 🛼	र=६ ्चलकार न र तः, -
CANDIDATE INFORMATION (For Candidate's (Committe	es Only)	
7@Full Name of Candidate (Include any nickname.)	8. Party	Affiliation or If Independen	t Candidate
		and I made and proceeding	o vientantinis par compressor economica, economica per consistente y
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Cou	inty of Residence : 🏰 🍇	THE STATE OF THE S
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".) Outgoing Treasurer (Within ten (10) days amend St	atement of Org	anization.) Dost-Con	vention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: 01/01/017 Through: 12/31/17		This Period	Year to Date
-13. Cash on hand and investments at the beginning of this reporting period.		11,964.20	
14. Cash on hand and investments January 1, current year.			18,010.85
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)			* 12,300.00
15b. Unitemized			2,415.00
Today and Initial Today and Today	BTOTAL	0.00	14,715.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	11,964.20	32,725.85
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			24,906.21
17b. Unitemized			669,22
110.7.62 11105 114 615 114	BTOTAL	0.00	25,575,43
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	11,964.20	7,150.42
19. Debts OWED BY the committee (Use Schedule D.)			
20. Debts OWED TO the committee (Use Schedule E.)			
CERTIFICATION			ORRIESICO ESCONLY
I CERTIEY, THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	TRUE, COR	RECT AND COMPLETE.	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Signature of Treasurer Jana Title Reasurer	[Date (mm/dd/yy) 12/28/78 FE	B 2 8 2018
Signature of Candidate (if applicable)	1	Date (mm/d //yy)	
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpos	e. (IC 3-9-4-5) A person who knowingly	LOCOTE CIRCUIT COURT
WARNING: Any information contained in this report may not be copied for safe 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 accu Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-14-1-14)	rate report a	is required by the ladianak OF	LA FORTE CIRCON



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

FILE NUMBER				
Page	1_	of	7	

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. BOYD FOR SHERIFF JOHN BOYD 9918 N 125 EAST LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)	- I ENIOD		05/04/17
Contributor's Occupation (if required) CO SHERIFF	Other Receipts: Interest Loan Miscellaneous (specify)		\$1,000.00	TRES ZONA
2. CHARBONNEAU FOR SENATE ED CHARBONNEAU 2503 SHERWOOD DR. VALPARAISO, IN 46385	Contributions: Direct In-Kind (describe)			05/24/17
Contributor's Occupation (if required) STATE SENATOR	Other Receipts: Interest Loan Miscellaneous (specify)		\$250.00	TRES ZONA
3. FRIENDS OF JIM PRESSEL JIM PRESSEL 1772 N LOFGREN RD ROLLING PRAIRIE, IN 46371	Contributions: Direct In-Kind (describe)		\$200.00	05/22/17
Contain deals Compating (if maying)	Other Receipts: Interest Loan Miscellaneous (specify)		\$200.00	TRES ZONA
Contributor's Occupation (if required) 4. LUKE MESSER FOR CONGRESS LUKE MESSER PO BOX 917 SHELBYVILLE, IN 46176	Contributions: Direct In-Kind (describe)		2052.22	05/24/17
	Other Receipts: Interest Loan Miscellaneous (specify)		\$250.00	TRES ZONA
Contributor's Occupation (if required)	Contributions:			
	☐ Direct ☐ In-Kind (describe)	:		
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)		- 10 55 55		
SUBTOTAL TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A	\$ 1700.00		
(Enter total on ITE	N 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

	FILE	NUMB	ER	
Page	2	of	7	

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
1 EDWARD BAKWIN 433 W U S HWY 20	Direct			,,
LAPORTE, IN 46350	In-Kind (describe)			5/4/17
,				
	Other Receipts:		\$1,000.00	,
	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			TRES ZONA
DETIMED	i iviisoerianeous (specify)			1110 20147
Contributor's Occupation (if required) RETIRED	A 17. P			_
2 MICHAEL BOHACEK	Contributions: Direct			
220 POKAGON TR	In-Kind (describe)			5/24/17
MICHIGAN CITY, IN 46360			•	-5
	Other Receipts:		\$250.00	
	Interest Loan			TDEC ZONA
	Miscellaneous (specify)			TRES ZONA
Contributor's Occupation (if required) BUSINESS OWNER				
3. JIM & JENN BURR	Contributions:			
1805 N SHEBEL ROAD	Direct		İ	05/04/17
MICHIGAN CITY, IN 46360	In-Kind (describe)			
	Other Receipts:		\$350.00	
	Interest Loan			
	Miscellaneous (specify)			TRES ZONA
Contributor's Occupation (if required) ?				,
4 TOM DERMODY	Contributions:			:
615 W MAPLE LN	☑ Direct ☐ In-Kind (describe)			06/10/17
LAPORTE, IN 46350	[] III-IVIIU (Gescribe)			
	Other Receipts:		\$180.00	
	☐ Interest ☐ Loan			TDE0 3011
	Miscellaneous (specify)			TRES ZONA
Contributor's Occupation (if required)				
5. MICHAEL GONDER	Contributions:			
114 BITTERSWEET TRL	Direct			05/24/17
MICHIGAN CITY, IN 46360	In-Kind (describe)			
	Other Receipts:		\$250.00	
	☐ Interest ☐ Loan			
	Miscellaneous (specify)			
Contributor's Occupation (if required) SALES				
	THIS PAGE OF SCHEDULE A	\$ 2030-00		
TOTAL OF ALL PAGES OF SCHEDULE		\$		
(Enter total on ITEM	1 15a of the Summary Sheet.)			



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(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

FILE NUMBER				
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Page	3	of	7	11

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1. RICH & CONNIE GRAMAROSSA	Contributions:			
8444 N 500 EAST	Direct			05/04/17
ROLLING PRAIRIE, IN 46371	In-Kind (describe)			
	Other Receipts:		\$250.00	
·	Interest Loan			
	Miscellaneous (specify)			TRES ZONA
Contributor's Occupation (if required) BUSINESS OWNER	<u> </u>			
2 DANIEL GRANQUIST	Contributions:			
1070 S CALUMENT RD SUITE 892	☑ Direct ☐ In-Kind (describe)			05/04/17
CHESTERTON, IN 46304	III-Nitid (describe)			
	Other Receipts:	1	\$250.00	
	☐ Interest ☐ Loan			TDE0 70MA
	Miscellaneous (specify)			TRES ZONA
Contributor's Occupation (if required) LAWYER				
3. TERRY HENDERSON	Contributions:	:		
283 E 276TH ST	Direct In-Kind (describe)			05/24/17
ATLANTA, GA 46031]		•
	Other Receipts:		\$250.00	
	Interest Loan			TRES ZONA
	Miscellaneous (specify)			TILLO ZOTA
Contributor's Occupation (if required) ?				
4 RALPH HOWES	Contributions: Direct			
3487 W WAVERLY RD LAPORTE, IN 46350	n-Kind (describe)			05/04/17
EAFORTE, IN 40330		_		
	Other Receipts:		\$250.00	
	Interest Loan Miscellaneous (specify)			TRES ZONA
DETIDED	(Opcory)			
Contributor's Occupation (if required) RETIRED		<u> </u>	<u> </u>	
5. CYRIL HUERTER	Contributions: Direct			0.510.411.5
ſ	In-Kind (describe)			05/24/17
		4	\$200.00	
	Other Receipts:		Φ200.00	
	Miscellaneous (specify)			TRES ZONA
2				
Contributor's Occupation (if required)	THIS PAGE OF SCHEDILLE A	8 1262 12		
TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A	\$ 1200.00	-	
	Vi 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

FILE NUMBER				
Page _	4	of	7	

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. CHRIS JACKSON 2305 NORMANDY DR APT 3C MICHIGAN CITY, IN 46360	Contributions: ☑ Direct ☐ In-Kind (describe)			05/04/17
DELIVERY REPORT	Other Receipts: Interest Loan Miscellaneous (specify)		\$250.00	TRES ZONA
Contributor's Occupation (if required) DELIVERY PERSON	Carleila diana			<u> </u>
2 CARY KIRKHAM 1530 MICHIGAN AVE LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			03/29/17
DETIDED	Other Receipts: Interest Loan Miscellaneous (specify)		\$350.00	TRES ZONA
Contributor's Occupation (if required) RETIRED	Contributions			
3. CORAL LAWN PO BOX 344 KINGSBURY HEIGHTS, IN 46346	Contributions: Direct In-Kind (describe)		4455	05/04/17
	Other Receipts: Interest Loan Miscellaneous (specify)		\$150.00	TRES ZONA
Contributor's Occupation (if required) RETIRED				<u> </u>
4. BLAIR MILO 1712 MICHIGAN AVE LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			05/24/17
EV MAYOR	Other Receipts: Interest Loan Miscellaneous (specify)		\$1,000.00	TRES ZONA
Contributor's Occupation (if required) EX-MAYOR	0-44-4			-
5. TOM MILO 92 KESTON ELM DR LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			05/04/17
	Other Receipts: Interest Loan Miscellaneous (specify)		\$500.00	TRES ZONA
Contributor's Occupation (if required) BUSINESS OWNER				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 22.50,00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY M 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

FILE NUMBER				
	<u>.</u>			<u>I</u>
Page _	5	of _	1	

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. CHARLIE MORGAN 6252 W 400 N LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			04/14/18
DETIDED	Other Receipts: Interest Loan Miscellaneous (specify)		\$250.00	TRES ZONA
Contributor's Occupation (if required) RETIRED	0 17 5		-	
2. LEIGH MORRIS 424 UPPER LAKE SHORE DR LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			04/07/17
	Other Receipts: Interest Loan Miscellaneous (specify)		\$250.00	TRES ZONA
Contributor's Occupation (if required) RETIRED		<u></u>		
3. DR. EDWIN MUELLER 117 EVERGREEN DR LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			05/24/18
	Other Receipts: Interest Loan Miscellaneous (specify)		\$1,000.00	TRES ZONA
Contributor's Occupation (if required) RETIRED				
4 RICK OSTERGREN ?	Contributions: Direct In-Kind (describe)			05/04/18
	Other Receipts: Interest Loan Miscellaneous (specify)		\$150.00	TRES ZONA
Contributor's Occupation (if required) ?				
5. DAVE PENDERGAST P O BOX 1693 LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			05/24/18
FINANCIAI PI ANNER	Other Receipts: Interest Loan Miscellaneous (specify)		\$250.00	TRES ZONA
Contributor's Occupation (if required) FINANCIAL PLANNER	THE PACE OF SCHEDULE A	10,000,00		
TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY	\$ 190000		
(Enter total on ITE	M 15a of the Summary Sheet.)	\$		



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(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FIL	E NUMB	ER	
Page _	6	of	7	

Street, number, city, state, ZIP code	CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
1. DR DAVID PORTER 1.112 INDIANA AVE LAPORTE, IN 46350	FULL MAILING ADDRESS	OR OTHER RECEIPT			
Direct Contributor's Occupation (if required) DOCTOR					
Contributor's Occupation (if required) DOCTOR DOC		_			05/24/17
Contributor's Occupation (if required) DOCTOR ATLEY PRICE Gontributions: Direct In-Kind (describe)	LAPORTE, IN 46350	In-Kind (describe)			, , , , , , , , , , , , , , , , , , ,
Interest Loan Miscellaneous (specify)	1	Other Receipts:		\$250.00	. I.
Contributor's Occupation (If required) DOCTOR 2 ATLEY PRICE P O BOX 277 MICHIGAN CITY, IN 46360 Contributor's Occupation (If required) LAWYER Contributor's Occupation (If required) LAWYER Contributor's Occupation (If required) LAWYER Contributor's Occupation (If required) BUSINESS OWNER 4. RONALD SCHAFER 1566 GLACIER BEND LAPORTE, IN 46350 Contributor's Occupation (If required) BUSINESS OWNER Contributor's Occupation (If required) BUSINESS	•			i	TDEC ZONA
2 ATLEY PRICE P O BOX 277 MICHIGAN CITY, IN 46360 Interest Loan Interest Lo	<u>.</u>	Miscellaneous (specify)			I RES ZONA
2 ATLEY PRICE P O BOX 277 MICHIGAN CITY, IN 46360 In-Kind (describe)	Contributor's Occupation (if required)				
In-Kind (describe) In-Kind (describe) S250.00 TRES ZONA	2 ATLEY PRICE	l ==			٠
Contributor's Occupation (if required) LAWYER Contributions: Interest Loan Miscellaneous (specify) Miscellaneous (specify) TRES ZONA		=			05/04/17
Contributor's Occupation (if required) ARS RENE RAY 1420 W VALLEYWOOD DR LAPORTE, IN 46350 Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) Substitutes Loan Interest Loan Interest Loan Interest Loan Miscellaneous (specify) TRES ZONA TRE	MICHIGAN CITY, IN 46360	☐ In-talla (describe)			wit
Interest Loan Miscellaneous (specify)		Other Receipts:		\$250.00	
Contributor's Occupation (if required) LAWYER 3. MRS RENE RAY 1420 W VALLEYWOOD DR LAPORTE, IN 46350 Other Receipts: Interest Loan Miscellaneous (specify) TRES ZONA Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) Contributions: Direct Loan Miscellaneous (specify) Other Receipts: Interest Loan Miscellaneous (specify) TRES ZONA Contributor's Occupation (if required) Direct In-Kind (describe) Contributor's Occupation (if required) Direct In-Kind (describe) Contributor's Occupation (if required) Direct In-Kind (describe) S250.00 TRES ZONA TRES ZONA Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) BUSINESS OWNER SUBTOTAL THIS PAGE OF SCHEDULE A S 2000 (b) TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY Contributions Contributions Contributions Contributions Contributor's Occupation (if required) DUSINESS OWNER SUBTOTAL THIS PAGE OF SCHEDULE A S 2000 (b)					1
3. MRS RENE RAY 1420 W VALLEYWOOD DR LAPORTE, IN 46350 Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) Contributor's Occupation (if required) S. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributions: Contributions: Direct Interest □ Loan □ Miscellaneous (specify) Contributions: □ Direct □ Interest □ Loan □ Miscellaneous (specify) TRES ZONA Contributor's Occupation (if required) S. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributions: □ Direct □ In-Kind (describe) SUBTOTAL THIS PAGE OF SCHEDULE A \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Miscellaneous (specify)	1		TRES ZONA
3. MRS RENE RAY 1420 W VALLEYWOOD DR LAPORTE, IN 46350 Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) Contributor's Occupation (if required) S. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributions: Contributions: Direct Interest □ Loan □ Miscellaneous (specify) Contributions: □ Direct □ Interest □ Loan □ Miscellaneous (specify) TRES ZONA Contributor's Occupation (if required) S. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributions: □ Direct □ In-Kind (describe) SUBTOTAL THIS PAGE OF SCHEDULE A \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Contributor's Occupation (if required) LAWYER				· · ·
In-Kind (describe) S250.00 TRES ZONA					·.
Contributor's Occupation (if required) BUSINESS OWNER Contributor's Occupation (if required) BUSINESS OWNER Contributions Contributions Direct Interest Loan Interest	1420 W VALLEYWOOD DR				04/14/1587
Contributor's Occupation (if required) BUSINESS OWNER A RONALD SCHAFER 1566 GLACIER BEND LAPORTE, IN 46350 Contributor's Occupation (if required) S. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributor's Occupation (if required) Contributor's Occupation (if required) S. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributor's Occupation (if required) SUBTOTAL THIS PAGE OF SCHEDULE A ON THE LAST PAGE ONLY SUBTOTAL THIS PAGE OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE A CONTRIBUTED TOTAL OF ALL PAGES OF SCHEDULE	LAPORTE, IN 46350	I I I I I I I I I I I I I I I I I I I			•
Contributor's Occupation (if required) BUSINESS OWNER 4. RONALD SCHAFER 1566 GLACIER BEND LAPORTE, IN 46350 Contributor's Occupation (if required) 5. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributions: Direct Direct Doan Miscellaneous (specify) Direct D				\$250.00	
Contributor's Occupation (if required) BUSINESS OWNER 4. RONALD SCHAFER 1566 GLACIER BEND LAPORTE, IN 46350 Other Receipts: Interest Loan Miscellaneous (specify) 5. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributor's Occupation (if required) Other Receipts: Interest Loan Miscellaneous (specify) Other Receipts: Interest Loan Miscellaneous (specify) TRES ZONA					TRES ZONA
4. RONALD SCHAFER 1566 GLACIER BEND LAPORTE, IN 46350 Other Receipts: Interest Loan Miscellaneous (specify) Contributor's Occupation (if required) 5. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributor's Occupation (if required) Contributor's Occupation (if required) SUBTOTAL THIS PAGE OF SCHEDULE A S 2000 0) TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY		Miscellaneous (specify)			TINEO ZOIVI
4. RONALD SCHAFER 1566 GLACIER BEND LAPORTE, IN 46350 Other Receipts: Interest Loan Miscellaneous (specify) Contributor's Occupation (if required) 5. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributions: Direct In-Kind (describe) O5/04/17 TRES ZONA Contributor's Occupation (if required) O5/04/18 TRES ZONA TRES ZONA TRES ZONA TRES ZONA TRES ZONA Contributor's Occupation (if required) BUSINESS OWNER SUBTOTAL THIS PAGE OF SCHEDULE A SUBTOTAL THIS PAGE OF SCHEDULE A TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	Contributor's Occupation (if required) BUSINESS OWNER				
1566 GLACIER BEND LAPORTE, IN 46350 Other Receipts: Interest Loan Miscellaneous (specify) TRES ZONA Contributor's Occupation (if required) 5. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributions: Direct In-Kind (describe) O5/04/17 TRES ZONA SUBTOTAL THIS PAGE OF SCHEDULE A SUBTOTAL THIS PAGE ONLY TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY		·			:
Contributor's Occupation (if required) S. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributions: Interest Loan		1 -			05/04/17
Contributor's Occupation (if required) 5. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributor's Occupation (if required) Other Receipts: Interest Loan Interest 5. Loan Interest 5. Direct In-Kind (describe) Other Receipts: Interest 5. Loan Interest 5	LAPORTE, IN 46350				,
Contributor's Occupation (if required) 5. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify) TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY				\$250.00	
Contributor's Occupation (if required) 5. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributor's Occupation (if required) Other Receipts: Interest Loan Miscellaneous (specify) TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY		 			TRES ZONA
5. TIM STABOSZ 1501 MICHIGAN AVE LAPORTE, IN 46350 Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify) Contributor's Occupation (if required) BUSINESS OWNER SUBTOTAL THIS PAGE OF SCHEDULE A TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY		Miscellaneous (specify)			11120 20101
1501 MICHIGAN AVE LAPORTE, IN 46350 Other Receipts: Interest Loan Miscellaneous (specify) SUBTOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	Contributor's Occupation (if required)				
In-Kind (describe) USINESS OWNER In-Kind (describe) USINESS OWNER USINESS OWNER USINESS OWNER USINESS OF SCHEDULE A SACROLOGY USINESS OF SCHEDULE A ON THE LAST PAGE ONLY Contributor's Occupation (if required) USINESS OWNER USINESS O					0.510.445
Contributor's Occupation (if required) BUSINESS OWNER SUBTOTAL THIS PAGE OF SCHEDULE A \$ 2000.00 TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY		I			05/04/18
Contributor's Occupation (if required) BUSINESS OWNER SUBTOTAL THIS PAGE OF SCHEDULE A \$ 2000.00	EAPURTE, IN 40300			m4 000 00	
Contributor's Occupation (if required) BUSINESS OWNER SUBTOTAL THIS PAGE OF SCHEDULE A \$ 3000.00				\$1,000.00	
Contributor's Occupation (if required) BUSINESS OWNER SUBTOTAL THIS PAGE OF SCHEDULE A \$ 3000.00		1 =			TRES ZONA
SUBTOTAL THIS PAGE OF SCHEDULE A \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Miscellaneous (specify)			
SUBTOTAL THIS PAGE OF SCHEDULE A \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Contributor's Occupation (if required) BUSINESS OWNER				
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)	SUBTOTAL		\$ 2000 D		
	TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY M 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

FILE NUMBER					
Page	7	of	7	·	

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. ALLEN STEVENS 5277 W 1475 S HANNA, IN 46340	Contributions: Direct In-Kind (describe)			08/21/18
	Other Receipts: Interest Loan Miscellaneous (specify)		\$190.00	TRES ZONA
Contributor's Occupation (if required) TRUCK DRIVER				
² JACKIE WALORSKI P O BOX 954 MISHAWAKA, IN	Contributions: Direct In-Kind (describe)			05/24/17
	Other Receipts: Interest Loan Miscellaneous (specify)		\$530.00	TRES ZONA
Contributor's Occupation (if required) CONGRESSWOMAN				
3. TROY WOODRUFF 106 HARRISON DR VINCENNES, IN 47591	Contributions: Direct In-Kind (describe)			05/04/17
-	Other Receipts: Interest Loan Miscellaneous (specify)		\$250.00	TRES ZONA
Contributor's Occupation (if required)	Contributions:	<u> </u>		
4 PAUL ZONA 6706 N 300 W MICHIGAN CITY, IN 46360	Continuations. Direct In-Kind (describe)			05/04/17
	Other Receipts: Interest Loan Miscellaneous (specify)		\$250.00	TRES ZONA
Contributor's Occupation (if required) RETIRED				
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)	_	 		
	L THIS PAGE OF SCHEDULE A	\$ 1220:00		
TOTAL OF ALL PAGES OF SCHEDUL	E A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet.	\$ 1220.00		



(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

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

FILE NUMBER				
				••
Page _	1	of _	3	<u>.</u>

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_FAMERICAN WELDING & GAS		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:		\$235.59	10/13/17
Code O ADVANTAGE DIRECT365	PRINTER	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:		\$2,184.00	02/15/17
Code F ALL AMERICAN CLASSICS	POLITICAL ITEMS	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		\$1,196.00	05/1218
Code F BARTLETT'S FISH CAMP	CATERER	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:		\$3,498.00	11/08/17
BEACHER BUSINESS PRINTER	PRINTER	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:		\$634.65	VARIOUS
BECKY PRESSEL	HELLIUM FOR BALLONS	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		\$105.92	08/11/17
Code O FRONTIER PHONE & INTERNET	PHONE & INTERNET	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ OtherPurpose:		\$1,079.88	VARIOUS
	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.)					



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER					
	,				
Page _	2	_ of _	3		

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)
GENERAL INSURANCE	INSURANCE	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:		\$1,833.00	VARIOUS.
Code O HEATHER STEVENS	MISC MATERIALS	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		\$105.93	06/01/17
Code O HESTON HILLS EVENT CENTER	EVENT CENTER	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:		\$3,138.80	05/12/17
Code 0 ILENE ZONA	MISC MATERIALS	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:		\$1,816.70	VARIOUS
Code O LAPORTE COUNTY FAIR BOARD	RENT & MISC ITEMS	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:		\$1,100.00	VARIOUŠ
Code 0 LAPORTE MASONIC LODGE	RENT	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:		\$4,500.00	VARIOUS
Code O	MISC MATERIALS	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		\$230.61	VARIOUS
	SUBTOTAL THIS PA	GE OF SCHEDULE B	\$/2 725.0		
TOTAL OF ALL F	\$				



(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

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

FILE NUMBER				
Page _	3_	of	3	

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)
M C PARK DEPT	RENT	☐ Payment of Debt ☐ Returned Contribution ☐ Other		\$500.00	10/04/17
	Purpose:				
Code ONIPSCO	GAS & ELECTRIC	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other		\$959.37	VARIOUS
		Purpose:			2 - 18 - 19 - 19 - 19 - 19 - 19 - 19 - 19
Code O	SECURITY	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
MR. ANDY PAUL		OtherPurpose:	•	\$105.00	08/11/17
Code 0 PORTOFINO	CATERER	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:		\$1,442.80	12/03/17
Code A REPROGRAPHIC ART	SIGN MAKER	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:		\$240.00	07/06/17
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		\$0.00	
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		\$0.00	
	SUBTOTAL THIS PA	AGE OF SCHEDULE B	\$32,47/7		
TOTAL OF ALL F	PAGES OF SCHEDULE B ON TI (Enter total on ITEM 17a of	HE LAST PAGE ONLY the Summary Sheet.)	1 0011 9NB		



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

46-18-67

TOTAL PAGES IN ENTIRE CFA-4 REPORT

16

1. Full Name of Committee (as on <i>Statement of Organization</i>) Check if this is a new committee (as on <i>Statement of Organization</i>)		B		71
LAPORTE COUNTY REPUBLICAN CONTI	AI	0	MM	tee :
2. Acronym or Abbreviated Name (if any)	3. Com		hone Number -9565	
4. Mailing Address (Address where all campaign finance correspondence is received.) 814 JEFFERSON AVE	Check if th	nis is a new a	address.	-
5. City, State, ZIP Code LAPORTE, IN 46350		y Affiliation <i>(i</i>		
CANDIDATE INFORMATION (For Candidate'	s Committe	ees Only)		
7. Full Name of Candidate (Include any nickname.)			r If Independent	Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Co	unty of Resid	lence	
TYPE OF REPORT			CONVENTION	I CANDIDATES ONLY
11. Check one: Pre-Primary Pre-Election Annual Nomination Other			Check one:	ention
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend	d Statement of Org	ganization.)	Post-Conv	ention
12. Reporting Period (mm/dd/yy): From: 01/01/18 Through: 04/13/18		COL	UMN A Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			13,241.12	
Cash on hand and investments January 1, current year.				13,241.12
CONTRIBUTIONS AND RECEIPTS				75,2 777
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (Use Schedule A.)			12,895.00	12,895.00
15b. Unitemized			3,344.00	3,344.00
15c. Add lines 15a and 15b in both columns.	UBTOTAL		16,239.00	16,239,00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL		29,480.12	29,480.12
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			6,990.99	6,990.99
17b. Unitemized			70.00	70.00
17c. Add lines 17a and 17b in both columns.	UBTOTAL		7,060.99	7,060:99
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL		22,419.13	22,419.13
19. Debts OWED BY the committee (Use Schedule D.)			0.00	
20. Debts OWED TO the committee (Use Schedule E.)			0.00	
CERTIFICATION			FC	OR OFFICE USE ONLY
CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT Signature of Treasurer Title TREASURER	IS TRUE, COR	RECT AND CC Date (mm/dd 04/20	MALETE 4 Vyv) IN CLERI	L E Dage
Signature of Candidate (if applicable)		Date (mm/dd	APR 2	2 0 2018
WARNING: Any information contained in the report may not be copied for sale or used for any commercial purp files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or ac Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC	curate report a	s required by t 9-4-17, IC 3-9-4	(ha Indiana 1-18) Petter	Alhobak RTE CIRCUIT COURT



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

FILE NUMBER				
Page 1 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	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. DOUG BIEGE 820 JEFFERSON AVE LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe)	PERIOD 100.00	YEAR-TO-DATE 100.00	04/06/18 1 ZONA.
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			
2. JOHN BOYD 9918 N 125 EAST LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe)	1000.00	1000.00	4//6/18 I ZONA
Contributor's Occupation (if required)COUNTY SHERIFF	Other Receipts: Interest Loan Miscellaneous (specify)			Y a service of the se
3. MIKE BRAUN	Contributions: X Direct In-Kind (describe)	500.00	500.00	04/09/18 I ZONA
ontributor's Occupation (if required)CANDIDATE	Other Receipts: Interest Loan Miscellaneous (specify)		-	
4. WILLIAM & MARY CHRISTAKES 607 LAKESIDE ST	Contributions: X Direct In-Kind (describe)	250.00	250.00	04/06/18 1 ZONA
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			n ne ne
5. DAN CRONIN 1902 LAKESHORE DR MICHIGAN CITY, IN 46360	Contributions: X Direct In-Kind (describe)	250.00	250.00	04/11/18 I ZONA
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			¥ 3
	THIS PAGE OF SCHEDULE A	59100 NO		
TOTAL OF ALL PAGES OF SCHEDULE		\$ 2,100.00		



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

FIL	E NUMBER		
	, .		
Page _	22	_ 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)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1 TOM & JACKIE DERMODY 615 W MAPLE LANE LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe)	500.00	500.00	04/06/18 D I ZONA . † 5
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			
2. MITCH & KARYL FEIKES . 1328 LAKESIDE ST LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	500.00	500.00	4//6/18 I ZONA
3. DEB FLEMING ELKHART, IN	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	100.00	100.00	04/06/18 I ZONA
4. TERRY GARNER 4611 W 1300 S HANNA, IN 46340 Contributor's Occupation (if required) _CCONTRACTOR	Contributions: X Direct in-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	1250.00	1250.00	04/06/18 I ZONA
5. DAN AND CAROL GRANQUIST 1070 S CALUMET RD # 892 MICHIGAN CITY, IN 46360	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	500.00	500.00	04/09/18 I ZONA
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$2850, %		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$		



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

FILE NUMBER	
Page3	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. CHARLES & RITA HAGENOW 66 KESTON ELM DR LAPORTE, IN 46350 Contributor's Occupation (if required)	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	250.00	250.00	04/06/18 I ZONA
2. CYNTHIA HEDGE PO BOX 9600 MICHIGAN CITY, IN 46360	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	150.00	150.00	4//6/18 I ZONA
3. CARY & SHARON KIRKHAM 1530 MICHIGAN AVE LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	200.00	200.00	04/06/18 I ZONA
4. MARK & LAURA KRENTZ 1807 KINGSBURY LAPORTE, IN 46350 Contributor's Occupation (if required)	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	250.00	250.00	04/06/18 I ZONA
5. DAVID LOSCIUTO LAPORTE	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	150.00	150.00	04/06/18 I ZONA
Contributor's Occupation (if required)				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 1,000.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEI	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

	FILE	NUMBE	R	
Page	4	of	60	

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) 1. DANIEL & PATRICIA LUCK 1311 BOYD BLVD LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)	PÉRIOD	YEAR-TO-DATE	04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	I ZONA
2. JOHN & DEBORAH MENGEL 1508 LAKE SHORE DRIVE MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)			04/09/18
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$365.00	\$365.00	I ZONA
3. BLAIR MILO 1712 MICHIGAN AVE LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			04/06/18
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	I ZONA
4 LEIGH & MARSHA MORRIS 424 UPPER LAKE SHORE DR LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			04/06/18
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	I ZONA
5. RICK & LAURA OSTERGREN 15 ELM DRIVE LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)	**C20.00	#C20.00	04/06/18
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$630.00	\$630.00	I ZONA
	THIS PAGE OF SCHEDULE A	\$ 1,995.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITER	A ON THE LAST PAGE ONLY 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

FILE NUMBER				
Page	5	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. LISA PIERZAKOWSKI 3511 W JOHNSON RD	Contributions: Direct			
LAPORTE, IN 46350	In-Kind (describe)			04/06/18
_ :: • • · · · _, · · · · · · · · · · · · · · · · ·				
	Other Receipts: Interest Loan Miscellaneous (specify)	\$175.00	\$175.00	I ZONA
Contributor's Occupation (if required)				
2. ATLEY & MARILYN PRICE	Contributions:			
P O BOX 277	Direct			04/06/18
MICHIGAN CITY, IN 46360	n-Kind (describe)			0-4700710
	Other Receipts:	\$250.00	\$250.00	
	Interest Loan		,	•
	Miscellaneous (specify)		!	1 ZONA
Contributor's Occupation (if required)				
3 RONALD & SUZANNE SCHAFER	Contributions:			
1566 GLACIER BEND	Direct			04/06/18
LAPORTE, IN 46350	In-Kind (describe)			04/00/10
	Other Receipts:	\$250.00	\$250.00	
	Interest Loan			
	Miscellaneous (specify)			I ZONA
Contributor's Occupation (if required)				
4 TIM STABOSZ	Contributions:			
1501 MICHIGAN AVENUE	✓ Direct ☐ In-Kind (describe)			04/06/18
LAPORTE, IN 46350	I III-Mild (describe)			
	Other Receipts:	\$1,000.00	\$1,000.00	
	Interest Loan			
	Miscellaneous (specify)			I ZONA
Contributor's Occupation (if required) FINANCIAL ADVISOR				
5. ALLEN & HEATHER STEVENS	Contributions:			
5277 W 1475 S	☑ Direct ☐ In-Kind (describe)			04/06/17
HANNA, IN 46340	In-rana (describe)			
	Other Receipts:	\$390.00	\$390.00	
	Interest Loan			1.7014
	Miscellaneous (specify)			I ZONA
Contributor's Occupation (if required)				
SUBTOTAL ⁻	THIS PAGE OF SCHEDULE A	\$ 2,065.00		
TOTAL OF ALL PAGES OF SCHEDULE A	A ON THE LAST PAGE ONLY I 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

	FILE	NUMB	ER	
Page _	6	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)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1. JEFF & JOANNE THORN	Contributions:			
2609 FAIRWAY DR	☐ In-Kind (describe)			04/09/18
MICHIGAN CITY, IN 46360	in-Kind (describe)			0 1700710
	Other Receipts:	\$200.00	\$200.00	1.
	Interest Loan	4200100	7_00.00	. · ·
	Miscellaneous (specify)			I ZONA
Contributor's Occupation (if required)				
2 PAUL & KARLA VINCENT	Contributions;			
1516 MICHIGAN AVE	☑ Direct			
LAPORTE, IN 46350	In-Kind (describe)			04/06/18
		4		
	Other Receipts:	\$730.00	\$730.00	-1
	Interest Loan			I ZONA
	Miscellaneous (specify)			I ZONA
Contributor's Occupation (if required)				
3. JACKIE WALORSKI	Contributions:			
P O BOX 954	Direct			04/06/18
MISHAWAKA, IN 46546	In-Kind (describe)			04/00/10
		\$500.00	\$500.00	
	Other Receipts:	ψ500.00	ψ500.00	
	Miscellaneous (specify)			I ZONA
Contributor's Occupation (if required)		-		
4.	Contributions: Direct			,
	In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
5.	Contributions:			_ :
	Direct			
	In-Kind (describe)			
	Other Receipts: Interest Loan			
	Miscellaneous (specify)			
	(openin)			
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$ 1,430.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEN)	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$ 11,440.00		



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

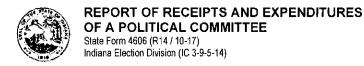
(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

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	1	of	1	

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1. LOCHNER, INC. JOHNSON ROAD LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,000.00	\$1,000.00	I ZONA
^{2.} WALSH AND KELLY, INC 1700 E MAIN ST GRIFFITH, IN 46319	Contributions: Direct In-Kind (describe)	4500.00	050000	04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	I ZONA
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			. 7 46
4.	Contributions: Direct In-Kind (describe)	-		int.
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			÷ ;
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 1,500.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.)	\$ 1,500.00		



(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 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	NUMBE	R	
Page _	1	of	1	

CONTRIBUTOR'S FULL NAME AND 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. NONE	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			· 克
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
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)			
SUBTOTAL	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.)	\$		

(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, 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	1	of		4. —	

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)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1. HORIZON BANK PAC MICHIGAN CITY, IN	Contributions: Direct In-Kind (describe)			01/24/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,112.97	\$1,112.97	I ZONA
2.	Contributions: Direct In-Kind (describe)			- 1. - 1. - 1.
	Other Receipts: Interest Loan Miscellaneous (specify)			
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)			
SURTOTAL	THIS PAGE OF SCHEDULE A	\$ 1,112.97		
TOTAL OF ALL PAGES OF SCHEDULE		\$ 1,112.97		



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 regular party 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 contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER					
Page	of	1			

party committee).			Page	_ or
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
None	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			3.10
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
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)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 0.00		:
TOTAL OF ALL PAGES OF SCHEDULE		\$_0_		
(Enter total on ITE	M 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

FILE NUMBER					
Page _	1	of	2		

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 F ACTION PRINTING MC CLUNG RD LAPORTE, IN 46350	PRINTER	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$200.00	\$200.00	03/25/18
BEACHER PRINTING FRANKLIN ST MICHIGAN CITY, IN. 46350	PRINTER	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$187.22	\$187.22	03/09/18
Code F DELLA NONNAS COOKIES	BAKER	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$250.00	\$250.00	04/04/18
Code F HESTON HILLS BANQUET FAIL ROAD LAPORTE, IN 46350	CATERER	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$3,781.90	\$3,781.90	04/06/18
Code A LAPORTE COUNTY FAIR LAPORTE, IN 46350	COUNTY FAIR	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$750.00	\$750.00	02/27/1/8
LAPORTE MASONIC LODGE JEFFERSON AVE LAPORTE, IN 46350	LANDLORD	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$750.00	\$750.00	03/01/18
NIPSCO	UTILITY	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$241.60	\$241.60	03/13/18
	SUBTOTAL THIS PAG		\$ 6,160.72		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THI (Enter total on ITEM 17a of t		\$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER				
Page _	2	of	2	

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)
PIONEER LAND COMMITTEE LAPORTE, IN 46350		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$100.00	\$100.00	04/06/18
Code F USPS POSTMASTER	GOVT	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$425.00	\$425.00	03/07/18
FRONTIER PHONE	PHONE COMPANY	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$305.27	\$305.27	03/23/18
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		·	, M.
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		·	Ý
	SUBTOTAL THIS PAG		\$ 830.27		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of to		\$ 6,990.99		



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 NUMBER	
	1	.
Page	7	of
		.

				Page /	of
Enter Text of Public Question.	PUBLIC QUESTIC	N INFORMATION			
and toxe of abile gaestion.					
Type of Question: Statewide	Local				
Position: Supported Oppos	sed	i			
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	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:			
Code		☐ Direct ☐ In-Kind			
		Payment of Debt Returned Contribution			
		Other			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
		Returned Contribution Other	İ		
		Purpose:			
Code		☐ Direct ☐ In-Kind			
		Payment of Debt Returned Contribution			
		Other			
		Purpose.			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt		-	
		Returned Contribution			
		Other			
	CHRIOTAL TIME DA	25 05 001/50/11 5 0			
TOTAL OF ALL PAGE	SUBTOTAL THIS PACES OF SCHEDULE C ON TH	GE OF SCHEDULE C	\$ 0.00		
	(Enter total on ITEM 17a of t		20-		



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				

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	DATE DEBT INCURRED (mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Nene					:,
LENDER'S OCCUPATION:					
			i		
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
			** ** ** ** ** ** ** ** ** ** ** ** **		
LENDER'S OCCUPATION:					
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LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					}
Constitution of the second of		SUBTOTA	AL THIS PAGE	OF 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.)					<u>-</u> 0 _



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

(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			

BORROWER'S NAME AND MAILING ADDRESS	CO-SIGNER'S NAME AND MAILING ADDRESS (if any)	ORIGINAL 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
. 1 1 -					•
None	·			;	
					_
					:
				:	
		-			
			_		
			1		
			-		
SUBTOTAL THIS PAGE OF SCHEDULE E					\$ 0.00
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summary Sheet.)				5-0-	



(CFA-4) **Summary Sheet**

OF

tate Form	4606 (R1	14 / 10-17	7)	
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.

FILE NUMBER					
46-	18-	- 6	1		
TOTAL PAG	ES IN EN	TIRE CFA	-4 REPORT		
	01 1	6	:		

IS THIS AN AMENDMENT? Yes No			0	16
COMMITTEE INFORMATION			17	
Full Name of Committee (as on Statement of Organization) LAPORTE COUNTY REPUBLICAN CENTRAL COMMITTEE Check if this is a n				
2. Acronym or Abbreviated Name (if any)	3. Com	mittee Tele	phone Numb	er
	(219)32	26-9565	
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check if th	iis is a new	address.	
814 JEFFERSON AVE				
5. City, State, ZIP Code	1		(if applicable)	, con
LAPORTE, IN 46350	REPUE	BLICAN		, 4 · · · · · · · · · · · · · · · · · ·
CANDIDATE INFORMATION (For Candidate's C	ommitte	es Only)		
7. Full Name of Candidate (Include any nickname.)	8. Party	/ Affiliation o	or If Independ	dent Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Co	unty of Resi	dence	
TYPE OF REPORT	ļ		CONVENT	ION CANDIDATES ONLY
11. Check one:			Check one.	
Pre-Primary Pre-Election Annual Nomination Other			Pre-Co	onvention
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend State	tement of Org	anization.)	Post-C	Convention
2. Reporting Period (mm/dd/yy):		COI	_UMN A	COLUMN B
From: 01/01/18 Through:10/12/18		This	s Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		13,241	1.12	
14. Cash on hand and investments January 1, current year.				13241.12
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		40.005	- 00	40.005.00
15a. Itemized (Use Schedule A.)		12,895		12,895.00
15b. Unitemized		3,344.		3,344.00
	TOTAL	16,239		16,239.00
	TOTAL	29,480).12	29,480.12
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)			_	
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		6,990.	99	6,990.99
17b. Unitemized		70.00		70.00
17c. Add lines 17a and 17b in both columns.	TOTAL	7060.9		7060.99
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	22,419	9.13	22,419.13
19. Debts OWED BY the committee (Use Schedule D.)		0.0		
20. Debts OWED TO the committee (Use Schedule E.)		0.0		

CER	RTIFICATION		FOR OFFICE	_
I CERTIFY THATA HAVE EXAMINED THIS STATEMENT. TO THE BES	ST OF MY KNOWLEDGE AND BELIEF	TIT IS TRUE, CORRECT AND COMPLETE.	IN CLERKS	OFFICE
ignature of Treasurer	Title TREASURER	Date (<i>mm/dd/yy</i>) 10/19/18	001 1 0	2010
Signature of Candidate (if applicable)		Date (mm/dd/yy)	0CT 19	20 ID-
WARNING: Any information contained in this record may not be explicated	for cale or upod for any commercial of	urnoco /// 2 /l /l 5) A norcon who khowingly		

files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

Kersen Petratick



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

FILE NUMBER				
	•			
Page1 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. DOUG BIEGE 820 JEFFERSON AVE LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe)	100.00	100.00	04/06/18 T ZONA
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			
2. JOHN BOYD 9918 N 125 EAST LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe) Other Receipts:	1000.00	1000.00	4//6/18 I ZONA
Contributor's Occupation (if required)COUNTY SHERIFF	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			
3. MIKE BRAUN	Contributions: X Direct In-Kind (describe)	500.00	500.00	04/09/18 I ZONA
ontributor's Occupation (il required)CANDIDATE	Other Receipts: Interest Loan Miscellaneous (specify)			
4. WILLIAM & MARY CHRISTAKES 607 LAKESIDE ST LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe) Other Recelpts: Interest Loan	250.00	250.00	04/06/18 I ZONA
Contributor's Occupation (il required)	Miscellaneous (specify)			
5. DAN CRONIN 1902 LAKESHORE DR MICHIGAN CITY, IN 46360	Contributions: X Direct In-Kind (describe)	250.00	250.00	04/11/18 I ZONA
	Other Receipts: Interest Loan Miscellaneous (specify)			y
Contributor's Occupation (if required)		• 0100 00		
	THIS PAGE OF SCHEDULE A.	\$2,100.00		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$		·



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

FILE NUMBER	
Page2 of	6

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) RECEIVED BY
(street, number, city, state, ZIP code) 1. TOM & JACKIE DERMODY 615 W MAPLE LANE LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan	PERIOD 500.00	YEAR-TO-DATE 500.00	04/06/18 S 1 ZONA 16
Contributor's Occupation (if required)	Miscellaneous (specify)			
2. MITCH & KARYL FEIKES 1328 LAKESIDE ST LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	500.00	500.00	4//6/18 I ZONA
3. DEB FLEMING ELKHART, IN	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify).	100.00	100.00	04/06/18 I ZONA
4. TERRY GARNER 4611 W 1300 S HANNA, IN 46340 Contributor's Occupation (if required) _CCONTRACTOR	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	1250.00	1250.00	04/06/18 I ZONA
5. DAN AND CAROL GRANQUIST 1070 S CALUMET RD # 892 MICHIGAN CITY, IN 46360 . Contributor's Occupation (if required)	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	500.00	500.00	04/09/18 I ZONA
	THIS PAGE OF SCHEDULE A	\$2850.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEN	A ON THE LAST PAGE ONLY	\$		



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

FILE NUMBER	
Page _3 of _	

				الله الله الله الله الله الله الله الله
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. CHARLES & RITA HAGENOW 66 KESTON ELM DR LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe)	250.00	250.00	04/06/18 I ZONA
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			g Andrew
2. CYNTHIA HEDGE PO BOX 9600 MICHIGAN CITY, IN 46360	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	150.00	150.00	4//6/18 I ZONA
3. CARY & SHARON XIRKHAM 1530 MICHIGAN AVE LAPORTE, IN 46350	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	200.00	200.00	04/06/18 I ZONA
4. MARK & LAURA KRENTZ 1807 KINGSBURY LAPORTE, IN 46350 Contributor's Occupation (if required) _	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	250.00	250.00 ·	04/06/18 I ZONA
5. DAVID LOSCIUTO LAPORTE . Contributor's Occupation (if required)	Contributions: X Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	150.00	150.00	04/06/18 I ZONA
SUBTOTAL 1	HIS PAGE OF SCHEDULE A	\$ 1000.00		
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

	FILE	NUMBE	R	
Page _	4	of	60	

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. DANIEL & PATRICIA LUCK 1311 BOYD BLVD LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)	PENIOD		04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	I ZONA
Contributor's Occupation (if required)				
2 JOHN & DEBORAH MENGEL 1508 LAKE SHORE DRIVE MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)			04/09/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$365.00	\$365.00	I ZONA
Contributor's Occupation (if required)				
3. BLAIR MILO 1712 MICHIGAN AVE LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	I ZONA
Contributor's Occupation (if required)				
4. LEIGH & MARSHA MORRIS 424 UPPER LAKE SHORE DR LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			04/06/18
Contributor's Occupation (# required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	I ZONA
5. RICK & LAURA OSTERGREN 15 ELM DRIVE LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			04/06/18
Contributions Comments of Constituted	Other Receipts: Interest Loan Miscellaneous (specify)	\$630.00	\$630.00	I ZONA
Contributor's Occupation (if required)	THIS PAGE OF SCHEDULE A	\$ 4,005,00		
TOTAL OF ALL PAGES OF SCHEDULE		\$ 1,995.00 \$		



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

FILE NUMBER				
Page	5	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. LISA PIERZAKOWSKI 3511 W JOHNSON RD LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$175.00	\$175.00	I ZONA
Contributor's Occupation (if required)	C		<u> </u>	
2 ATLEY & MARILYN PRICE P O BOX 277 MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)			04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	I ZONA
Contributor's Occupation (if required)	Contributions:			
2 RONALD & SUZANNE SCHAFER 1566 GLACIER BEND LAPORTE, IN 46350	Ontributions: Direct In-Kind (describe)			04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	I ZONA
Contributor's Occupation (if required)	Contributions:			ă.
4-TIM STABOSZ 1501 MICHIGAN AVENUE LAPORTE, IN 46350	☑ Direct ☐ In-Kind (describe)			04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,000.00	\$1,000.00	I ZONA
Contributor's Occupation (if required) FINANCIAL ADVISOR				;
5. ALLEN & HEATHER STEVENS	Contributions:			
5277 W 1475 S HANNA, IN 46340	Direct In-Kind (describe)			04/06/17
Contributed On weather (if one find)	Other Receipts: Interest Loan Miscellaneous (specify)	\$390.00	\$390.00	I ZONA
Contributor's Occupation (if required)	THE PACE OF COURT!!! 5 4	6 0005.00		
TOTAL OF ALL PAGES OF SCHEDULE A	THIS PAGE OF SCHEDULE A	\$ 2,065.00		
	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

	FILE	NUMBE	ER	
Page	6	of	6	·

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) 1. JEFF & JOANNE THORN 2609 FAIRWAY DR MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)	PERIOD	YEAR-TO-DATE	04/09/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	I ZONA
Contributor's Occupation (if required)	Contributions:			
² PAUL & KARLA VINCENT 1516 MICHIGAN AVE LAPORTE, IN 46350	Direct In-Kind (describe)			04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$730.00	\$730.00	I ZONA
Contributor's Occupation (if required)				
3 JACKIE WALORSKI P O BOX 954 MISHAWAKA, IN 46546	Contributions: Direct In-Kind (describe)			04/06/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	I ZONA
Contributor's Occupation (if required)				
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
5.	Contributions: Direct In-Kind (describe)			
Contributorio Comunicion (if movimul)	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)	THIS PAGE OF SCHEDULE A	\$ 1,430.00		
TOTAL OF ALL PAGES OF SCHEDULE		\$ 11,440.00		



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).

	F	ILE NUME	BER	
Page	11	of	1	<u> </u>

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1. LOCHNER, INC. JOHNSON ROAD LAPORTE, IN 46350	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$1,000.00	\$1,000.00	04/06/18 I ZONA
^{2.} WALSH AND KELLY, INC 1700 E MAIN ST GRIFFITH, IN 46319	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	04/06/18 I ZONA
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)			·
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 1,500.00		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$ 1,500.00		



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 receipts 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 N	NUMBE	R	
Page _	1	of	1	

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.} NONE	Contributions: Direct In-Kind (describe)	1 ENIOD		
	Other Receipts: Interest Loan Miscellaneous (specify)			
2.	Contributions: Direct In-Kind (describe)			
•	Other Receipts: Interest Loan Miscellaneous (specify)	·		
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)	-		
4	Contributions: Direct n-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL 1	HIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



State Form 4606 (R14 / 10-17) Indiana Election División (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, rebates, returns of deposil, 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	
			<u> </u>
5	1		12
Page	!	of	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	(mm/dd/yy)
(street, number, city, state, ZIP code) 1. HORIZON BANK PAC MICHIGAN CITY, IN	Contributions: Direct In-Kind (describe)	PERIOD	YEAR-TO-DATE	01/24/18
	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,112.97	\$1,112.97	I ZONA
2.	Contributions: Direct In-Kind (describe)			**
	Other Receipts: Interest Loan Miscellaneous (specify)			
3.	Contributions: Direct In-Kind (describe)		. ;	ì
	Other Receipts: Interest Loan Miscellaneous (specify)			. 2
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 A	HIS PAGE OF SCHEDULE A ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$ 1,112.97 \$ 1,112.97	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	



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 receipts, famount from candidate's, legislative caucus, and regular party 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 contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee)

	FILE NUMBER
Page	/ of /

party committee).				· - ·
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 RÉCEIVED (mm/dd/yy) RECEIVED BY
None	Contributions: Direct tn-Kind (describe)			.:
7.01.	Other Receipts: Interest Loan Miscellaneous (specify)			
2.	Contributions: Direct In-Kind (describe)			·
	Other Receipts: Interest Loan Miscellaneous (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Recelpts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct tn-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTO	TAL THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDU (Enter total on	ILE A ON THE LAST PAGE ONLY ITEM 15a of the Summary Sheet.)	\$ _ 0-		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER					
Page_	11	of	2		

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 CUMULATIVE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
Code <u>F</u> ACTION PRINTING MC CLUNG RD LAPORTE, IN 46350	PRINTER	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$200.00	\$200.00	03/25/18 ₅
BEACHER PRINTING FRANKLIN ST MICHIGAN CITY, IN. 46350	PRINTER	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$187.22	\$187.22	03/09/18
Code <u>F</u> DELLA NONNAS COOKIES	BAKER	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$250.00	\$250.00	04/04/18
Code <u>F</u> HESTON HILLS BANQUET FAIL ROAD LAPORTE, IN 46350	CATERER	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$3,781.90	\$3,781.90	04/06/18
Code A LAPORTE COUNTY FAIR LAPORTE, IN 46350	COUNTY FAIR	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$750.00	\$750.00	02/27/1/8
LAPORTE MASONIC LODGE JEFFERSON AVE LAPORTE, IN 46350	LANDLORD	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$750.00	\$750.00	03/01/18
NIPSCO	UTILITY	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$241.60	\$241.60	03/13/18
	SUBTOTAL THIS PAG	SE OF SCHEDULE B	\$ 6,160.72		
TOTAL OF ALL PA	AGES 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	NUMB	ER	
Page _	2	of	2	

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)
PIONEER LAND COMMITTEE LAPORTE, IN 46350		Direct In-Kind Payment of Oebt Returned Contribution Other Purpose:	\$100.00	\$100.00	04/06/18
Code F USPS POSTMASTER	GOVT	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$425.00	\$425.00	03/07/18
FRONTIER PHONE	PHONE COMPANY	☑ Direct	\$305.27	\$305.27	03/23/18
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			16
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 PAC		\$ 830.27		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON THI (Enter total on ITEM 17a of t		\$ 6,990.99		



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.

FILE NUMBER	
,	
Pageof	

				Page/	or
Enter Text of Public Question.	PUBLIC QUESTIC	N INFORMATION			
Type of Question: Statewide Doppos	Local ed				
RECIPIENT'S NAME AND MAILING ADDRESS (street, number. city, state. ZIP code)	RECIPIENT'S OCCUPATION	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:		·	
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		
	S OF SCHEDULE C ON TH	E LAST PAGE ONLY	20-		



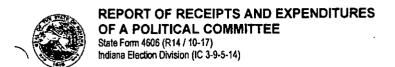
State Form 4606 (R14 / 10-17) Indiana Election Division (IC 3-9-5-14)

(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		_

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	DATE DEBT INCURRED (mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
None	·				***
LENDER'S OCCUPATION:					
LENDER'S COCUPATIONS					
				·	
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:				OF SCHEDULE D	\$ 0.00
	TOTAL OF AL	L PAGES OF SCHEDUL (Enter total on)	.E D ON THE LA TEM 19 of the S	Summary Sheet.)	5_0 _



(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					

BORROWER'S NAME ANDMAILING ADDRESS	CO-SIGNER'S NAME AND MAILING ADDRESS (if any)	ORIGINAL 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)	YÉAR-TO-DATE	PERIOD
4 .	·			:	
None					
					**
1					i
			,	-	
SUBTOTAL THIS PAGE OF SCHEDULE E					
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summary Sheet.)					5-0-