

CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

(CFA-1)

State Form 4604 (R14 / 10-17) Indiana Election Division (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

							FILE NUMBER
1. IS THIS AN AMENDMENT?	Yes	s ☐ No If Yes	s, please enter	the file n	umber in this bo	эх. →	46-19-47
SECTION A. CANDIDATE	FINEO	RMATION: EIL	l in all applic	able box	es as fully and	accur	rately as possible
2. Last Name		rst Name	Middle N		Nickname		3. Type of Committee (Check one)
						•	Candidate's Principal Committee
PARRY		DUNNE	Ar	THUR	~/	A	☐ Exploratory Committee
PARRY 4. Mailing Address (number and street, city	, state, and a	ZIP code)	,	5. FAX (Opi	ional)	6. E-ma	ail Address (Optional)
				1,	AI/A	dir	no portal Artelian and
ZZOG Maple S	State	ZIP Code	8. County	ــــــــــــــــــــــــــــــــــــــ	9. Telephone (Dav)	1000	Ine. party @ yahoo, COM 10. Telephone (Evening)
Much	IN	46360	1		1		
Michigan City 11. Party Affiliation	ــــــــــــــــــــــــــــــــــــــ	170000	1 24 10 2	I C	1(47) 8 15-6	her if an	(509) 554-9300 Not required for an exploratory committee.
11. Party Affiliation (☐ Democratic ☐ Libertarian (Repu		l Other			of Michia		
							rately as possible.
SECTION B. COMMITTEE 13. Full Name of Committee (Do not all	obreviete 1	Check if this is	a new name	- 10 (0 λ)	vo uo tutty ätti	- लाजस्या	atory as possible.
CITIZENS FOR T 14. Mailing Address (number and street, cit	NO STATE OF	e TARRY	if this is some	trace 145 =	Y (Ontione)	140 =	nail Address (Optional)
_		. ∠ir code) ∐ L ineck	s ir uus is a new add	Jiess. 15. FA	~ (Optional)		
2206 Maple St.			Tag 5) 19. Telephone	dva	ine parry 68@ 9mail. con 20. Committee Organization Date
17. City	State	ZIP Code	18. County		19. Telephone		20. Committee Organization Date
Michigan City	IN	46360	LA PORT	e	(219) 873-6	30Z	102/06/19
Michigan City 21. Chairperson Full Name 1 De	signate Ca	andidate as Chairpers	ion. X Check if	this is a new	chairperson.	J	
Collins D Lan	MAA	0 << 4	•				
CONNIE D. GILA 22. Mailing Address (number and street, cit	y, state and	(ZIP code) M Charl	if this is a new add	ress. 23 FA	X (Optional)	24. E-m	nail Address (Optional)
_			w aut	- 1		1/4	nie Gramarosa @ Yakoo.co
8444 N. 500 EAS	57	ZIP Code	26. County		27. Telephone (Day	CONT	28. Telephone (Evening)
20. Oity	otate	ZIF CODE		_	# 10 C C	724	
POILING PRAIRIE 29. Bank or Other Pepositories (List al	124	46371	1 LA PORT		(A17) 221	150	()
29. Bank or Other Depositories (List al	l banks or	other depositories in	which the committe	e deposits fu	nds, holds accounts, i	ents safet	y deposit boxes or maintains funds.)
CENTIER BAN	K.						
30. Exploratory Committee (Give brief sta	itement expl	aining purpose of an explo	ratory committee only.)				the committee pay the candidate a salary or
				reimbursei	ment for lost wages? I	r Yes, atta	ch a copy of the contract.) 🔲 Yes 💆 No
SECTION C. APPOINTME	NT OF	TREASURER	(IC 3-9-1-14)				1.
32. I, as Chairperson of the					Signatur	e of the ft.	ommittee Chairperson
committee, appoint the following		nn ael				\mathcal{N}_{-}	•
Treasurer of the Committee.		DUA:	Ne A. PA	RRY		- }-	
33. Treasurer's Full Name 📜 Design	nate candi	idate as treasurer.	☐ Check if this is a	a new tleasu	er.		
DUANE ARTHI	RP.	ARRU	•				
DUANE ARTHU 34. Mailing Address (number and street, cit	y, state, and	(ZIP code) (Check	if this is a new add	ress. 35. FA	X (Optional)	36. E-m	nail Address (Optional)
	_			,	١	1.10	ine DANNIAUAha- ans
ZZOG MAPIE S	State	ZIP Code .	38. County) 39. Telephone (Day)	100	1 ne. Parry @yahoo.com 40. Telephone (Evening)
			1	0	i ' ' ' '		
MichigAN City	ILU	70560	LATORT	<u></u>	(417)815-6	50<	(509) 554-9300
		APPOINTMEN			ata lot		
41. I give notice that I accept	the duti	ies and responsi	idilities of Trea	surer of t	nis Signature of F	rerson A	ccepting Appointment
Committee. I am not the chair permitted for a candidate commit			nance committe	ee (except	" V	re l	1. Jame
		F STATEMENT			- Colle		FOR OFFICE USE ONLY
We certify as the candidate an				the Comm	ttee and that w	have	<u> </u>
we certify as the candidate an examined this statement. To the b	cest of o	ur knowledge and	1 belief it is true.	, correct ar	id complete.	- ""	FILED
12. Typed or Printed Name of Cha			f Chairperson		Date (mjr/dd/y	'y) 1	IN CLERKS OFFICE
			4-	-	- 02/19	118	
Connie (TRAMINE						<u>(' </u>	
13. Typed or Printed Name of Car	ndidate	Signature of	T Candidate	,	Date (mm/dd/)	y)	FEB 2 0 2019
DUANE A. PARR	V	Dua	me ACX	/	02/19/	19 1	
Warning: State law requires that any				(10) days o	1	1-101 A	1
person who knowingly files a fraudulent	report cor	mmits a Level 6 D fe	elony (IC 3-14-1-13)). A peNs√on v	vho fails to file a com	plete or	Koren de Ambrelo
accurate report as required by the India	ana Camp	aign Finance Law co	ommits a Class B i	misdemeanoi	(IC 3-14-1-14), and	may be	CLERK OF LA PORTE CIRCUIT COURT
subject to civil penalties (IC 3-9-4-16, IC	3-9-4-17, i	anu ic 3-9-4-18).				<u> </u>	THE PAYOUT COUNTY
,							



CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE State Form 4604 (R14 / 10-17)

I L E IN CLERKS OFFICE

State Form 4604 (R14 / 10-17)

Indiana Election Division (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS OF REVERSE SIDE.

(CFA-1)

	_								FILE NUMBER
1. IS THIS AN AMENDMENT?									46-19-47
SECTION A. CANDIDATE			in al					accura	tely as possible.
2. Last Name	Fir	st Name		Middle Na	me		Nickname		3. Type of Committee (Check one)
PARRY 4. Mailing Address (number and street, city.		DUANE		ART	HUR		N/A		Candidate's Principal Committee Exploratory Committee Address (Optional)
4. Mailing Address (number and street, city,	state, and Z	IP code)							
					<i>ι</i> \			duani	o navry@vahoo.com
7. City	State	ZIP Code	8. Co	unty	<u> </u>	9. Tele	phone (Day)	Je	e, parry@yahoo.com 10. Telephone (Evening)
Michigan Corn	∣ IN ∣	46360	1	A POP	حرمب				1 -
7. City MICHIGAN Crry 11. Party Affiliation	<u></u>	10000		12. 0	ffice Sough				(509) 554-9300 Not required for an exploratory committee.)
☐ Democratic ☐ Libertarian 🗶 Repu	iblican 🔲	Other		_	TAYOR	OF	Michi	gAN.	City
SECTION B. COMMITTEE	INFO	RMATION: Fill	in al	l applic					
13. Full Name of Committee (Do not ab	breviate.)	☐ Check if this is:	a new r	ame.					
CITITIONS FOR	DU	LUE PARG	o 🗸						
CITIZENS FOR 14. Mailing Address (number and street, cit									il Address (Optional)
2206 Maple 5	-000	نسيد			Ι,	3 N	14	duan	10 1000 68@ amailie
17. City	State	ZIP Code	18. C	ounty		19. Te	lephone	WY - 212	20. Committee Organization Date
Michigan	1-41	44210	1	L. Page	-0	1719	072-/	307	(mm/dd/yy) 02/06/19
MICHIGAN CITY 21. Chairperson's Full Name De	signate Ca	indidate as Chairperso	on. E	Check if t	his is a new	chairpe	rson.		2/00///
DUANE ARTHUI 22. Mailing Address (number and street, cit	v state, and	ZIP code) Check	if this is	a new addr	ess. 23. FA	XX /Opti	ional)	24. E-ma	il Address (Optional)
270/ 1/- 1-							/1	1.60	10 - 1 - 1 60 Andrews
25 City	State	7IP Code	26 C	ounty		27. Te	lenhone (Davi	ovar	E parry 680, 9 mart. Com 28. Telephone (Evening) (509) 554-9300 deposit boxes or maintains funds.)
25. City	State	11 Code	10.0	. 12>	_	7.0	.cpnone (20)/		
Michigan Cry	ZN	46560	1 11	IBRTE	, da ita 6:	(217) 8/5-63	02	descrit bayes as maintains funds
					e deposits id	1108, 110	ius accounts, re	ins saidly	deposit boxes of maintains funds.)
30. Exploratory Committee (Give brief sta	1				lad Calani		7 . i.u. b	to AACO the	a committee new the condidate a calory or
30. Exploratory Committee (Give brief sta	tement expla	aining purpose of an explor	atory con	nmittee only.)	reimburse	es and i ment for	r lost wages? If `	ts (vviii trie Yes, attach	e committee pay the candidate a salary or a copy of the contract.) Yes X
Exploring children	ay to	redug PRIMI	ary c	3182710	¥U				a copy of the contract.) Yes X
SECTION C. APPOINTME	NT OF	TREASURER	(IC 3	-9-1-14)					
32. I, as Chairperson of the	e foreg	going Person Appo	inted II	reasurer					mmittee Chairperson
Treasurer of the Committee.	ig perso	DUANE	2 A	RAHUR	2 PARI	eV	Due	ene l	Same
committee, appoint the followin Treasurer of the Committee. 33. Treasurer's Full Name	nate candi	date as treasurer.	Chec	ck if this is a	new treasu	re/			
DUANE ARTHU	2 PA	rev.				•			0
DVANE ARTHU, 34. Mailing Address (number and street, city	, state, and	ZIP code) 🔲 Check i	if this is	a new addr	ess. 35. FA	X (Opti	onal)	36. E-mai	il Address (Optional)
2201 Hanlo STI	مهيموه				l_{ℓ}) N.	lephone (Day)	duan	LONG SHOULD COM
ZZOL Maple STA	State	ZIP Code	38. C	ounty		39. Te	lephone (Day)		40. Telephone (Evening)
MichigAN City		46360	L	A PORT	re	1219	873-63	oz	(509) 554-9300
SECTION D. ACCEPTANC		APPOINTMEN					<i></i>		
41. I give notice that I accept	the duti	es and responsit	oilities	of Treas	urer of t	his Si	gnature of Pe	rson Ac	cepting Appointment
Committee. I am not the chair,	erson o	of a campaign fin	ance	committe	e (except	as C	~		Parry
permitted for a candidate commit						. 7	Juane	-0.	FOR OFFICE USE ONLY
		STATEMENT		4		44	and Abad	2010	FORWFFICE USE ONLY
We certify as the candidate an examined this statement. To the b	a the a	uly appointed Cr orknowledge and	nairper helief	if is true.	ne Comm correct as	ntee, a	ind that we	nave	
42. Typed or Printed Name of Cha						10 0011	Date (mm/dd/yy)		
,	•			1102		-	AT los		
DUANE A. PARR 43. Typed or Printed Name of Carl	didata	Signature of	Candi	n Ja	<u>uy</u>		0Z 06 1	7	
= -		Signature of		_	U		1 1		
DUANE A. PARK Warning: State law requires that any	.	X	u.L.	a. Fa	mi		02/06/1	9	
Warning: State law requires that any	hange in	this information be re	ported	within ten	(10) (1ays o	f the ch	ange (IC 3-9-1-	10). A	
person who knowingly files a fraudulent accurate report as required by the India	report cor ina Camo:	nmits a Level 6 D fel sign Finance Law cor	ony (IC mmits a	: 3-14-1-13) a Class B n	. A person v nisdemeano	who fail: r <i>(IC 3-</i>	s to file a comp 14-1-14), and m	iete or nav be	
subject to civil penalties (IC 3-9-4-16, IC								,	



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REPORT OF RECEIPTS AND EXPENDITURES A POLITICAL COMMITTEE

OF

(CFA-4)

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

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.

46-19-47
TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT? Yes No

6

1. Full Name of Committee (as on Statement of Organization) Check if this is a new	name.		
CITIZENS FOR PUANE PARRY			
2. Acronym or Abbreviated Name (if any)	3. Commit	tee Telephone Number	
NIA	(219	, 873-630	2
	Check if this i	s a new address.	
5. City, State, ZIP Code	6. Party Af	filiation (if applicable)	
Michigan City, IN 46360		DUBLICAN	
CANDIDATE INFORMATION (For Candidate's	Committees	Only)	
7. Full Name of Candidate (Include any nickname.)	8. Party At	ffiliation or If Independent	Candidate
DUANE ARTHUR PARRY	Re	publican of Residence	
9. Office Sought (Include district number, if any. Not required for exploratory committee.)			
MAYOR OF Michigan City	LAF	PORTE	
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	ļ
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conve	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend Si	tatement of Organiz	ration.) Dost-Conv	ention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: 01/31/19 Through: 04/12/19		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		439.38	
14. Cash on hand and investments January 1, current year.			439.38
CONTRIBUTIONS AND RECEIPTS		1	
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		1100-00	1,100.00
15b. Uniternized	BTOTAL	170.00	170.00
		1,270,00	1,270,00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	1,709,38	
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)	,		
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		1,629.94	1,629,94 -0-
17b. Unitemized	JBTOTAL		- · · · · · · · · · · · · · · · · · · ·
		1,629.94	1,629.94
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	79,44	79.44
19. Debts OWED BY the committee (Use Schedule D.)		<u> 1,513.36</u>	
20. Debts OWED TO the committee (Use Schedule E.)			
CERTIFICATION		P	PR OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	S TRUE, CORRE	CT AND COMPLETE. IN	L TI TI D
Signature, or Treasurer	l Da	te (minopyy)	
Quane a. Yang COMMITTEE TREASU		4/21/19	
Signature of Candidate (if applicable)		te (mm/dd/yy)	R 2 2 2019
WARNING: Any information contained in this report any not be copied for sale or used for any commercial purpo	se (IC 3-0-4-5)	4/2///9 A person who knowledy	
files a fraudulent report commits a Level 6 felony. 4C 3-14-1-13) A person who fails to file a complete or acc 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)	curate report as	required by the Indiana	What fact I.
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)	3-9-4-76, IC 3-9-	4-17, IC 39-4-10 LERK OF LA	PORTE 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					
	46-1	9-4	7		
Page _	1	of	2		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
Richard GRAMAROSSA	In-Kind (describe)			£ £
335 Lake Hills Rd.	·			03/03/19
Michigan City, IN 46360	Other Receipts: Interest Loan			
4	Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		500.00	500,00	PARRY
2.	Contributions:			Ç
DUANE PARRY	In-Kind (describe)			
2206 Maple ST.				03/11/19
Michigani City, IN 46360	Other Receipts:			
Jan 27/27	Miscellaneous (specify)			DUANE
Contributor's Occupation (il required) CANdidate		100,00	600.00	PARRY
3.	Contributions:			ı
VARIOUS DONATORS	In-Kind (describe)			
VAICIOUS DONATOICS				03/12/19
	Other Receipts:			
	Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		70.00	670.00	PARRY
4.	Contributions:			(
Dunie Pinne	In-Kind (describe)			
Duane Parry				03/14/19
2206 Maple ST.	Other Receipts: Loan			
Michigan City, IN 46360	Miscellaneous (specify)			DUAN'E
Contributor's Occupation (if required)		150.00	820.00	PARRY
5.	Contributions:			
Ch TR	☐ Direct☐ In-Kind (describe)			
DUANE PARRY				03/15/19
2206 Maple ST.	Other Receipts:			25/11-2/11
Michigan City, IN 46360	Interest Loan Miscellaneous (specify)			DUANE
,		100.00	920.00	PARRY
Contributor's Occupation (if required) SUBTOTAL	THIS PAGE OF SCHEDULE A	i	,	
TOTAL OF ALL PAGES OF SCHEDULE	ON THE LAST PAGE ONLY	\$ 920.00		
(Enter total on ITEM	1 15a of the Summary Sheet.)	\$1,270.00		



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

FILE NUMBER					
46-19-47					
Page _	2	_ of _	يد.		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	(inm/dd/yy)
(street, number, city, state, ZIP code)	OK OTHER RECEIF	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
	Direct In-Kind (describe)			!
DUANE PARRY	[] SERVING (DESCRIBE)			03/28/19
2206 Maple St.	Other Receipts:			
Michigan City, IN 46360	Interest Loan			70.00
d /.	Miscellaneous (specify)			DUANE PARRY
Contributor's Occupation (if required)		250.00	1,170.00	PARRY
2.	Contributions:			•
<u> </u>	In-Kind (describe)			:
VARIOUS DONATORS				03/18/19
	Other Receipts:			90/19/1
	Interest Loan			DUALIE
	Miscellaneous (specify)			0
Contributor's Occupation (if required)		100.00	1,270.00	DUANE PARRY
3.	Contributions: Direct			•
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
4.	Contributions: Direct	·		
1	In-Kind (describe)			
·				
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)		-	
Contributor's Occupation (if required)				
5.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$ 350.00		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$ 1,270.00		
(Enter total on ITEM	1 15a of the Summary Sheet.)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE	NUM	BER	
4	!6-	19-	-47	
Page _	1	of _	2	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A AMOUNT THIS	COLUMN B	DATE OF EXPENDITURE
(street, number, cily, state, ZIP code)	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
Code	Verizen cell phone Service provider	Direct In-Kind Payment of Debt			* ***
The Cellular Connected	W(TCC) START SERVICE	Returned Contribution Other			
5230 S. FREHKLIU ST.		Purpose: Service fo	د ا		, ,
Michigan City, IN	MAYOR	Purpose: Service to Campaign Phone	34.10	34.10	02/02/19
	· /	☑ direct ☐ In-Kind			
Code	P. I.	Payment of Debt 4"			<u> </u>
WALMART	RETAILER	Returned Contribution			1
5780 FRANKLIN ST.		Other			
Michigan City, IN	MAYOR	Purpose: Purchase Phone	42,67	76.77	03/02/19
Code		☑ Direct ☐ In-Kind			
	Verizon service	Payment of Debt			ļ
TCC	PROVIDER	Returned Contribution Other			
5230 S. FRANKLIN ST.		Purpose: Cell phone			
MICHIGAN CITY, IN	Mayor	Service	34.10	110.87	03/02/19
•		☑ Direct ☐ In-Kind			
Code		Payment of Debt			
WALMART	RETAILER	Returned Contribution			·
I _		Other			
5780 FRANKLIN ST.	Marina	Purpose: Paper for HANDOUTS	947	120.34	03/02/19
Michigan City, IN	MAYOR		,,,,		
· Code	PRINTING & AppAREL	☐ Direct ☐ In-Kind ☐ Payment of Debt		-	
	المورور من من من من من من من كا	Returned Contribution			
Reprographic ARTS 2824 E. Hichigani Blud	- 3	Other			ļ
2829 E. Michigan Blod		Purpose: T-Shirt	5	72110 7211	a=lowled
Michigan City, IN	MAYOR	for CAMPAIGN	120,00	240.34	63/01/14
Code	,	Oirect In-Kind			
Code	Pariment	Payment of Debt			
HAWKINS PRINTING	PRINTERS	Returned Contribution			
HAWKINS PRINTING 315 LINCOLUWAY		Purpose: CAMPAIGA	l,		
LAPORTE, IN	MAYOR	Bus, Crads	66.34	366.68	03/07/19
	7	Direct In-Kind			
Code		Payment of Debt	İ		
Access LA PORTE COUNTY	TV STATION	Returned Contribution			
301E, 8+9 ST.		Purpose:			
	Marie	Sponson ST.	75.00	381.68	03/08/19
Michigan City, IN	MAYOR	PATRICKS PARAD			
	SUBTOTAL THIS PAG		\$381.68		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of t	E LAST PAGE ONLY the Summary Sheet.)	\$1629.94		

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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE NUMBER	
4	6-19-47	
Page _	Z of 2	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZiP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
Code		Direct In-Kind			
-	PRINTERS	Payment of Debt Returned Contribution	,	' 	
HAWKINS PRINTING	7212125	Other			
315 LINCOLNWAY		Purpose: PRINT	300.00	681.68	03/14/19
LAPORTE, IN	Mnyor	HANDEUTS	300.00		
Code	Advertisement	Direct In-Kind Payment of Debt			•
Myshopangel.com	MANUFACTURERS	Returned Contribution			
BAILSTON LAKE, NY		Other			
DATE TO LACE, NO	Marina	Purpose: CAMPAIGN BAGS+CALENDAR	e 681.80	1363.48	03/18/19
	Mayor	☑ Direct ☐ In-Kind	3 0 3 1 2 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Code		Payment of Debt			
	PRINTERS	Returned Contribution)	
Beacher Bus. Printer	5	Other			
911 FRANKLIN ST.	A division	Purpose: CAMPAIGA	5747	1,415.95	03/2 19</td
Michigal City, IN	MAYOR	BUS, CARDS	32,17	7,770,10	10/2003/11
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt	1		
	SIGN MAKER	Returned Contribution		ļ	
AQUARIAN PROMOTION	5 3	☐ Other			
2710 FRANKLIN ST.		PUTPOSE: SIGNLETTER FOR BOARD	\$ 101	1,515.95	mulalia
Michigan City, IN	MAYOR	1 2	706.00	1,313.13	CHOIT
. Code	Verizon Service	Direct In-Kind Payment of Debt			-
Tee	Provider	Returned Contribution			
		Other			ļ
5230 S. FRANKLIN ST.	11111111	Purpose: Cell phone	34.(0	1,550.05	04/02/19
MICHIGAN CITY, IN	MAYOR	Service Direct In-Kind		7,55020	<u> </u>
Code		Payment of Debt			
	SIGN MAKER	Returned Contribution			•
GRANTHAM AIRBRUSH	9	Other	1		
1122 W. 1000 N		Purpose: Upgrade	يد وس	1,601,05	04/03/19
LA PORTE, IN	MAYOR	CAMPAIGN SIGN	\$ 31.00	1,401,03	01103/11
Code	,	Direct In-Kind			
		Payment of Debt Returned Contribution			
HAWKINS PRINTING	PRINTERS	Other			
HAWKINS PRINTING 315 LINCOLNWAY		Purpose: Rubber STANG	h .		
LA PORTE, IN	MAUNE	AND PRINTING	Z8.89	1,62994	04/05/19
	SUBTOTAL THIS PAG	GE OF SCHEDULE B	\$1248.26		
TOTAL OF ALL P	AGES OF SCHEDULE B ON TH		1.		
TOTAL OF ALL I	(Enter total on ITEM 17a of t	he Summary Sheet.)	\$1,629.94		



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 INX 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						
46-19-47						
Page		1	of _	1		

The state of the s

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
DUANE PARRY ZZOG Maple ST. MICHIGAN CITY, IN LENDERS OCCUPATION: 46360	CITIZENS FOR DUANE PARRY 2018 CAMPAIGN COMMITTEE	1,015.36 Transfer from previou Campaign Con	12/31/18 s 41772e	1,015.36	1,015.36
DUANE PARRY ZZOG MAPLE ST. MICHIGAN CITY, IN LENDERS OCCUPATION	CITIZENS FOR DUANE PARRY		i i	<i>1515</i> .36	1,515.36
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION			4	्रक्षेत्रकृतकृति	state of the state
LENDER'S OCCUPATION.					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION.		SUBTOTA	L THIS PAGE O	F SCHEDULE D	\$/5/5,36
	TOTAL OF ALL	PAGES OF SCHEDUL (Enter total on I	E D ON THE LA TEM 19 of the S	ST PAGE ONLY ummary Sheet.)	\$1515.36 \$1515.36





CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

State Form 4604 (R15 / 5-19) Indiana Election Division (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

		_						FILE NUMBER
1. IS THIS AN AMENDMENT?	Yes	☐ No If Yes,	pleas	e enter the	file numbe	r in this box	. →	46-19-47
SECTION A. CANDIDATE	INFO	RMATION: Fill	in all	applicable	boxes as	fully and	accura	tely as possible.
2. Last Name		st Name		Middle Name		Nickname		3. Type of Committee (Check one)
D	-	7.22.10		400	T.IIO	ه/در		Candidate's Principal Committee
PARRY 4. Mailing Address (number and street, city, s		DUANE						Exploratory Committee
					X (Optional)			Address (Optional)
ZZOG Maple ST	Rec	ZiP Code) N/A	ephone (Day)	duan	10. Telephone (Evening)
7. City	State	ZIP Code	8. Cou	nty	9. Tel	ephone (Day)		10. Telephone (Evening)
MICHIGAN CITY 11. Party Affiliation	IN	46360	LA	Porte	(2/4	9 873-6	30Z_ er. if anv.	(So9) 554-9300 Not required for an exploratory committee.)
☐ Democratic ☐ Libertarian ☐ Reput	olican 🔲	Other	_	_ MA	402 OF	Michig	NJ C	LITY
SECTION B. COMMITTEE								
13. Full Name of Committee (Do not abb	reviate.)	☐ Check if this is	a new na	me.		ĺ		
CITITENS FOR T	بمن	18 PARRY						
CITIZENS FOR D 14. Mailing Address (number and street, city,	, state, and	ZIP code)	if this is	new address.	15. FAX (Op	tional)	16. E-ma	il Address (Optional)
			•		1		do	" a a chow to 86 away and
2206 Maple STR 17. City					() 19. To			ne parry 686 amail .com 20. Committee Organization Date
MICHIGAN CITY 21. Chairperson's Full Name Des	IN	46360	LA	PORTE	(ZI^{c})	?) 873- 6.	30Z	(mm/dd/yy) 02/06/19
21. Chairperson's Full Name Des	ignate Ca	andidate as Chairpers	on. 💢	Check if this is	a new chairpe	erson.		
DUANE ARTHO	07	2000						
DUANE ARTHU 22. Mailing Address (number and street, city,	, stale, and	ZIP code)	if this is a	new address.	23. FAX (Op	tional)	24. E-ma	all Address (Optional)
							dua	nonnuma Valonan
ZZO6 Maple ST, 25. City	State	ZIP Code	26. Co	unty	27. To	elephone (Day)	W DAI	nepavry@yahoo.com 28. Telephone (Evening)
MICHIGAN CITY 29. Bank or Other Depositories (List all	771	463/00	1 1 1	Pagra	. 77 103		. 7	F0 FEIL 9200
29 Park or Other Depositories (List all	panks or	other denocitories in	which the	committee de	weite funde h	olde accounte m	nte safatu	(307) 33 9 - 7300
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ords accounts, re	na saisty	deposit boxes of maritants rands.y
CENTIER BANK 30. Exploratory Committee (Give brief state			4		0-1	Dalas bases	A	4
30, Exploratory Committee (Give bire) State	етепі ехрі	aining purpose or an explo	ratory comi	rei				e committee pay the candidate a salary or had a copy of the contract.)
SECTION C. APPOINTME	NT OF	TREASURER	(IC 3-	9-1-14)				
32. I, as Chairperson of the	e fore	!		_		(1 - 7		ommittee Chairperson
committee, appoint the following Treasurer of the Committee.	g perso	DUAL)	e A	PARA	۷٧	Du	anl	a. Sauce
33. Treasurer's Full Name Design	ate cand	idate as treasurer.	Check	if this is a nev	reasurer.	, 6,,,	-0,00	u.cacq
_	_							V
DUANE ARTHUE 34. Malling Address (number and street, city	state, and	ZIP code) □ Check	if this is a	new address.	35. FAX (Op	tional)	36. E-ma	all Address (Optional)
					1		1	en a Galanda
ZZOG MAPLE STI	State	ZIP Colle	38 Co	untv	1() 39. To	elephone (Dav)	ava	ne, pavry@yahoo.Cort 401 Telephane (Evening)
		l .	ž	PORTE	i i			
Michigan City			1 .		(20	1 873 -63	<u> </u>	(509) 554-9300
		APPOINTMEN			6 41 · Ko			
41. I give notice that I accept t Committee. I am not the chairp	the dut	ies and responsi	bilities	of Treasure	er of this (S	A)		
permitted for a candidate committee			iance c	ommittee (t	xcept as	Duan	ul	1. Jany
		F STATEMENT	-					FOR OFFICE USE ONLY
We certify as the candidate and				son of the	Committee	and that we	have	O
examined this statement. To the b	est of c	ur knowledge and						FTT
42. Typed or Printed Name of Cha	irperso	n Signature of	Chairp	erson		Date (mm/dd/yy) [IN CLERKS OFFICE
Discus A Proces		Quar	u. C	C. Char		06/17/1	9	
DUANE A. PARRY 43. Typed or Printed Name of Can	didate	Signature of			7-	Date (mm/dd/yy		
į		Signature of	Januit	1 (J	1 1	1	HIN 1 7 2010
DUANE A. PARRY	•	Dua	re a	. Van	سروير	06/17/1	91	JUN 1 7 2019
Warning: State law requires that any o	hange in							1
person who knowingly files a fraudulent								Kura
accurate report as required by the India subject to civil penalties (IC 3-9-4-16, IC 3			oomids 2	CHESS D THISO	anteanor (IC 3			IERK OF LA PORTE CIRCUIT COURT
								THE CIRCUIT COURT

OF

(CFA-4) **Summary Sheet**

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

assistance in completing this form, see instructions on the reverse side.

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

FILE NUMBER

46-19-47

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT? Yes No		4	
COMMITTEE INFORMATION			
Full Name of Committee (as on Statement of Organization) Check if this is a new	name.		
CITIZENS FOR DUANE PARRY			
2. Acronym or Abbreviated Name (if any)	3. Commi	ttee Telephone Number	-
NIA	(219) 873 <i>-63</i> 0Z	
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check if this	is a new address.	
5. City, State, ZIP Code			
5. City, State, ZIP Code	1 - 1	ffiliation (if applicable)	
MICHIGAN CITY, IN 46360		ublican	
CANDIDATE INFORMATION (For Candidate's C	_	*	
7. Full Name of Candidate (Include any nickname.)		ffiliation or If Independen	t Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	Re	publican	
		y of Residence	
MAYOR OF MICHIGAN CITY	LAT	orte	
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conve	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend Sta	atement of Organia	zation.) Dost-Conv	vention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: 01/01/19 Through: 04/12/19	ne	This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		439.38	
14. Cash on hand and investments January 1, current year.			439.38
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		1,805.00	1,905,00
15b. Uniternized	70741	1805.00	<u> </u>
Tool had mile he had also he h	TOTAL		1,805.00
te. Add midd to and too in occurry, tank med to an occurry, tank med to a occurry, t	TOTAL	2,244,38	2,244.38
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	ļ,	1,629.94	1,629,94
17b. Unitemized		ф	Φ
17c. Add lines 17a and 17b in both columns.	BTOTAL	1,629,94	1,629.94
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	614.44	614.44
19. Debts OWED BY the committee (Use Schedule D.)		500-00	
20. Debts OWED TO the committee (Use Schedule E.)			

			_
	CERTIFICATION		FOR OFFICE USEONLYD
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. 1	TO THE BEST OF MY KNOWLEDGE AND BEL	IEF IT IS TRUE, CORRECT AND COMPLETE.	IN CLERKS OFFICE
Signature of Treasurer	Title	Date (mm/dd/yy)	
Durane a. Janes	COMMITTEE TRE	EASURER 10/08/19	6
Signature of Candidate (if applicable)		Date (mm/dd/yy)	OCT - 8 2019
Signature of Candidate (if applicable)		10/08/19	」
WARNING: Any information contained in this report may no	ot be copied for sale or used for any commercia	al purpose. (IC 3-9-4-5) A person who knowing 🗱	
files a fraudulent report commits a Level 6 felony. (IC 3-	14-1-13) A person who fails to file a complete	e or accurate report as required by the Indiana	howfurtheheate
Campaign Finance Law commits a Class B misdemeanor, (i	C 3-14-1-14) and may be subject to civil penalti	es. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)	RK OF LÁ PORTE 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	NUME	ER	
4	46-1	9-4	Ť_	
Page _	1	of	2_	

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. Richard GRAHAROSSA	Contributions: Direct			
335 LAKE HIlls Rd	In-Kind (describe)			03/03/19
Michigan City, IN 46360	Other Receipts: Interest Loan Miscellaneous (specify)			DUANE
	Miscella liebus (specify)	500,00	500.00	PARRY
Contributor's Occupation (if required)	Contributions:			, , , , , , ,
2 Richard GRAMAROSSA	Direct			
335 LAKE HILLS Rd.	CAMPAIGN SIGNS & Shire Other Receipts:	275		03/09/19
Michigan City, IN 46360	Interest Loan Miscellaneous (specify)			Turking
Contributor's Occupation (if required)		285.00	785.00	PARRY
3.	Contributions:			i
DUANE PARRY	Direct In-Kind (describe)			
2206 Maple ST.				03/11/19
MICHIGAN CITY, IN 46360	Other Receipts: Interest Loan			DUANE
0	Miscellaneous (specify)	100.00	885.00	PARRY
Contributor's Occupation (if required)		700.00	000.00	
4.	Contributions: Direct			
,	In-Kind (describe)			
VARIOUS DONATIONS				03/12/19
	Other Receipts:			
	☐ Interest ☐ Loan			
	Miscellaneous (specify)		اردد	DUANE
Contributor's Occupation (if required)		70.00	955.00	PARRY
5.	Contributions:	 		· •
DUANE PARRY	☐ In-Kind (describe)			
2206 Maple ST.	Trivilla (describo)			3/14/19
	Other Receipts:			
Michigan City, IN 46360	Interest Loan Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		150.00	1,105.00	PARRY
SUBTOTAL *	THIS PAGE OF SCHEDULE A	\$ 1.105.00		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$ 1805,00		



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

FILE NUMBER					
46-19-47					
Page	2	of	2		

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
2 0	Contributions:			
DUANE PARRY	n-Kind (describe)			3/15/19
2206 Maple 57.	Other Receipts:			3/13//
Michigan City, IN 46360	Interest Loan Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		100.00	1,205.00	PARRY
2.	Contributions:		·	Ť
Duane Parry	☐ In-Kind (describe)			1 1 0
2206 Maple ST.	Other Receipts:			3/28/19
Michigan City, IN 46360	Interest Loan			DUANE
7,7,7,7	Miscellaneous (specify)	35000	1,455.00	PARRY
Contributor's Occupation (if required)	Contributions:	2)0,00	1,733,00	, , , , , , , , , , , , , , , , , , ,
ANTHONY HENDRICKS	Direct			
,	In-Kind (describe)			3/28/19
306 DECATUR ST.	Other Receipts:			
Michigan City, IN 46360	Miscellaneous (specify)		,	DUANE
Contributor's Occupation (if required)		200.00	1,655.00	PARRY
4.	Contributions:			-
VARIOUS DONATIONS	In-Kind (describe)			, ,
	Other Receipts:			3/18/19
	Interest Loan			$ _{\mathcal{D}_{\text{out}}}$
	Miscellaneous (specify)	100.00	1,755.00	DUANE
Contributor's Occupation (if required)	Contributions:	700.00	1,733,00	TARRY
5.	Direct		;	
VARIOUS DONATIONS	In-Kind (describe)			3/28/19
	Other Receipts:			J Jaco II 1
	☐ Interest ☐ Loan☐ Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		50.00	1,805.00	PARRY
	THIS PAGE OF SCHEDULE A	\$ 700.00		
TOTAL OF ALL PAGES OF SCHEDULE		\$ 1,805.00		



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

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, <u>regardless of the amount</u>, 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					
40	6-19	-4	7		
Page		of _			

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any)	AMOUNT	DATE DEBT	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
DUANE PARRY 2706 Haple ST. Michigan City, IN LEMORTS OCCUPATION 46360	CITIZENS FOR DUNNE PARRY 2019 MAYOR CAMPAIGN COMMITTEE	\$00.00 LOAN FUR PRIMARY CAMPAIGN	૦4/12/19	\$500.00	\$500.00
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION			• 10 13 13 13 13 13 13 13 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15		
LENDER'S OCCUPATION.				sā sasjā	ol. a
LEMBER'S OCCUPATION,					
LENDER'S OCCUPATION LENDER'S OCCUPATION					
		SUBTOTAL	. THIS PAGE O	F SCHEDULE D	\$ 500.00
	TOTAL OF ALL	PAGES OF SCHEDULE (Enter total on 17			\$500.00 \$500.00



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

OF

(CFA-4) **Summary Sheet**

FILE NUMBER 46-19-47 TOTAL PAGES IN ENTIRE CFA-4 REPORT 20

COMMITTEE INFORMATION		*	,	
1. Full Name of Committee (as on Statement of Organization)	name.			
CITIZZHS FOR DUANE PARRY				
2. Acronym or Abbreviated Name (if any)	3. Comm	ittee Telephone	Number	_
N/A	(219) 873-6	362	
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check if this	is a new addre	SS.	
2206 Maple St.				
2204 Maple St. 5. City, State, ZIP Code		Affiliation (if appl	licable)	
MICHIGAN CITY, IN 46360		oublican		
CANDIDATE INFORMATION (For Candidate's C	ommittee	es Only)		:
7. Full Name of Candidate (Include any nickname.)		Affiliation or If In	-	nt Candidate
DUANE ARTHUR PARRY	Re	publicar	J	
DUANE ARTHUR PARRY 9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Cour	ity of Residence		
Mayor of Michigan City	LA.	PORTE		
TYPE OF REPORT		CON	IVENTIO	N CANDIDATES ONLY
11. Check one: / DAP		Che	ck one:	-
Pre-Primary Pre-Election Annual Nomination Other	•	🔲	Pre-Conv	ention ention
Final / Disbands Committee (Lines 18, 19, and 20 must be *0".) Utgoing Treasurer (Within ten (10) days amend Sta	tement of Orga	nization.)	Post-Con	vention ,
12. Reporting Period (mm/dd/yy):		COLUMN	A	COLUMN B
From: 04/13/19 Through: 12/31/19		This Peri		Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	L	614	4.44	; ;
14. Cash on hand and investments January 1, current year.				614.44
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (Use Schedule A.)		9,15	0.00	10,955,00
15b. Unitemized		· · · · · · · · · · · · · · · · · · ·	\$	Ø
15c. Add lines 15a and 15b in both columns.	TOTAL	9,150		10,955.00 \$ 10,955.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	9.764	1,44	11,569.44
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		7,98	3.53	9,613.47
17b. Unitemized		· · · · · · · · · · · · · · · · · · ·	d	\mathcal{A}
17c. Add lines 17a and 17b in both columns.	BTOTAL	7.98	<u>3,53</u>	9,613,47
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	1.78	0.91	1,455.97
19. Debts OWED BY the committee (Use Schedule D.)			0.00	
20. Debts OWED TO the committee (Use Schedule E.)				
CERTIFICATION		, p.,		FOR OFFICE USE ONE
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	TRUE, COR	RECT AND COMPL	- Table 1	CLERKS OFFICE
Signature of Treasurer Title		ate (mm/dd/yy)		
Duane a. Vary TREASURED		10/25/19	┸┛┑	CT 2 7 202 0
Signature of Candidate (if applicable)		ate (mm/dd/yy)		טו בי בטבט
Dune a. Parry		10/25 (19		
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 felday. (IC 3-14-1-13) A person who fails to file a complete or accuracy for a file and page 1 and complete or accuracy for a file and page 1	e. (IC 3-9-4-5) rate report at) A person who kno s required by the N	wingly adiana	Konju pehinduck
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)	LERK OF	LA PORTE CIRCUIT COUR



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					
4	6-1	9-4	7		
Page	1	of	7		

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (inm/dd/yy)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
(Street, Hamber, City, Otalo) 2.1. Code,	Contributions:			·
	Direct	•		
RICHARD GRAMLROSSA	In-Kind (describe)	*		03/03/19
335 LAKE HIlls Rd.	Other Receipts:		:	
MICHIGAN CITY, IN 46360	Interest Loan			Duane
9	Miscellaneous (specify)	500.00	500,00	PARRY
Contributor's Occupation (if required)				
2.	Contributions: Direct			
RICHARD GRAMAROSSA	In-Kind (describe)			<i>t</i> /
355 LAKE HILLS Rd.	·			03/09/19
Michigan City, IN 46360	Other Receipts:			DULLE
, herrigas erry, Es	Miscellaneous (specify)	285.00	701 - 0	PERRY
Contributor's Occupation (if required)		283.00	785.00	/ A ROZY
3.	Contributions:			
	Direct In-Kind (describe)			•
DUANE A. YARRY				03/11/19
2206 Maple St.	Other Receipts:			
Michigan City, IN 46360	Miscellaneous (specify)			DUANE
		100,00	885,00	Paney
Contributor's Occupation (if required)	Contributions:		· ·	
,	Direct			
·	In-Kind (describe)			03/12/19
	Other Receipts:			00/14.7
VARIOUS SOURCES	☐ Interest ☐ Loan			DUANE
	Miscellaneous (specify)	70.00	955.00	PARRY
Contributor's Occupation (if required)		·······-		
5.	Contributions: Direct	r		
DUANE A. PARRY	In-Kind (describe)			, ,
2206 Maple ST.				03/14/19
Michigan City, IN 46360	Other Receipts: Loan			
Michigan Ong 1-	Miscellaneous (specify)			DUANE PKRRY
Contributor's Occupation (if required)	· ·	150.00	1,105.00	Parry
	HIS PAGE OF SCHEDULE A	\$ 1,105,00		
TOTAL OF ALL PAGES OF SCHEDULE	ON THE LAST PAGE ONLY	\$		
(Enter total on II EM	15a 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	NUMB	ER	
	46-1	9-4	7 _	
Page _	2	of	7_	· · · · · · ·

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions: Direct			·
DUANE SEIFERT	In-Kind (describe)	*		63/15/19
4066 W. Schultz Rd.	Other Receipts:			
LAPORTE, IN 46350	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			Durne
Contributor's Occupation (if required)		100.00	1,2,05-00	PARRY
DUANE A. PARRY	Contributions: Direct In-Kind (describe)			
2206 Maple ST.				03/28/19
MICHIGAN CITY, IN 46360	Other Receipts: Loan			Duane
	Miscellaneous (specify)	250.00	1,455.00	Parry
Contributor's Occupation (if required)	Contributions:	•		
John HENDRICKS	Direct [In-Kind (describe)			
				03/28/19
ZOO E. Coolspring Ave. Michigan City, IN 46360	Other Receipts:		·	
1-11011.3120 211/120 12-1-1	Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		200.00	1,655.00	PARRY
4.	Contributions:			
DUANE A. PARRY	In-Kind (describe)			, ,
2206 Maple St.				03/28/19
Michigans City, IN 46360	Other Receipts: Loan			DUANE
9	Miscellaneous (specify)	100.00	1,755.00	PARRY
Contributor's Occupation (if required)		700.00	.,,	
5.	Contributions: Direct	<i>r</i> -		
VARIOUS SOURCES	In-Kind (describe)			63/28/19
	Other Receipts:			
	Miscellaneous (specify)			DUANE PARRY
Contributor's Occupation (if required)		50.00	1,805,00	PARRY
	HIS PAGE OF SCHEDULE A	\$ 700.00		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY 15a 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	NUMBE	ĒR	
	46-1	9-4	7	
Page _	3	of	7	

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.	Contributions:			
DUANE A. PARRY	In-Kind (describe)			63/29/19
2206 Maple ST.	Other Receipts:			
Michigan City, IN 46360	Interest Loan Miscellaneous (specify)	250,00		DOANE
Contributor's Occupation (if required)		250,00	2,055.00	PARRY
2.	Contributions: Direct		·	, i
Genald Fedorchax JR.	n-Kind (describe)			05/06/19
507 OUTLOOK COVE DR.	Other Receipts:			03/06/11
LAPORTE, IN 46350	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		100.00	2,155.00	PARRY
3.	Contributions:			
The A. P. and	Direct In-Kind (describe)			
DUANE A. PARRY				05/22/19
ZZOG MAPIE ST.	Other Receipts: Interest Loan			
Michigan Cry, IN 46360	Miscellaneous (specify)	/30000		DUANE
Contributor's Occupation (if required)		1,200.00	3,5 <i>5</i> 5.00	PARRY
4.	Contributions: Direct			
DUANE A. PARRY	In-Kind (describe)			05/29/19
2206 Maple ST.	Other Receipts:			05/2////
Michigan City, IN 46360	Interest Loan Miscellaneous (specify)	·		DUALLE
	Miscellaneous (specify)	1000.00	4,355.00	PARRY
Contributor's Occupation (if required)	Contributions:			
•	☐ Direct ☐ In-Kind (describe)	·		
	III-KIIII (describe)			05/31/19
VARIOUS SOURCES	Other Receipts:			
	Miscellaneous (specify)			DUANE PARRY
Contributor's Occupation (if required)	·	100.00	4,455.00	PARRY
	HIS PAGE OF SCHEDULE A	\$ 2,650,00		
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) Election Division (IC 3-9-5-14) Indiana

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

Itemized Contributions and Other Receipts

FILE NUMBER					
4	6-19-47	-			
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.	Contributions:	•		
DUANE A. PAREY	n-Kind (describe)	•	_	
1	·			06/21/19
2206 Maple ST.	Other Receipts:			tare and a second
Michigan Cry, IN 46360	Miscellaneous (specify)		· ·	- DUANÉ
Contributor's Occupation (if required)		400,00	4,855.00	PARRY
2	Contributions:			
7	In-Kind (describe)			
BARBARA J. PARRY	In rand (cooping)	•		06/24/19
2206 Maple ST.	Other Receipts:	-		30/21/11
Michigan City, IN 46360	Interest Loan			-
MICHIGAT CITY C	Miscellaneous (specify)	350.00	ا ر ـ د. ا	DUANE
Contributor's Occupation (if required)			5,205.00	PARRY .
3.	Contributions:			
274.	n-Kind (describe)		- ,, ,,	
	<u> </u>	•		67/01/19
1/	Other Receipts:		· ·	
Various Sources	Interest Loan Miscellaneous (specify)		-2 **	DUANE -
·	- Wiscentalieous (specify)	50.00	5,255.00	
Contributor's Occupation (if required)		50.00	3,257.00	/ARRY.
4.	Contributions: Direct			
	tn-Kind (describe)			-
			<i>'</i>	67/12/19
VARIOUS SOURCES	Other Receipts:			
VARIOUS ECONEES	Miscellaneous (specify)			DUANE
		100.00	5,355.00	
Contributor's Occupation (if required)	Contributions:	700.00	3,232,00	TARRY
*	Direct			
11	In-Kind (describe)			
Various Sources				07/26/19
VETERAUS FROM AMERICAL	Other Receipts:			
Legion Posts 374451	Miscellaneous (specify)			DUANE
Michigan City, IN Contributor's Occupation of required)		300.00	5,655.00	DUANE PARRY
	THIS PAGE OF SCHEDULE A	\$ 1,200.00		
TOTAL OF ALL PAGES OF SCHEDULE		\$		
(Enter total on 11E)	VI 15a of the Summary Sheet.)	1		



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
46-19-47
Page 5 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.	Contributions: Direct		,	
DUANE A. PARRY	In-Kind (describe)			01/20/19=
2206 Maple ST.	Other Receipts:	•		01/20/19
Michigan City, IN 46360	Interest Loan Miscellaneous (specify)		ere with	
)	· iviiscenarieous (specify)	0	11150	Duane-
Contributor's Occupation (if required)	C41-41	800,00	6735.00	PARRY
2.	Contributions: Direct	•	-	
DUANE A. PARRY	In-Kind (describe)			- 1 - 2 V-W12
2206 Maple ST.				08/06/19
Michigan City, IN 46560	Other Receipts: Intérest Loan		j.	A PIONE
principally and	Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		150.00	4605.00	PARRY -
3.	Contributions:	:		
	Direct In-Kind (describe)			
			I.	08/21/19
	Other Receipts:	·	·	03/21/17
VARIOUS SOURCES	Interest Loan			
	Miscellaneous (specify)	<i>_</i>		DUANE
Contributor's Occupation (if required)	·	50.00	6,655.00	PARRY
4.	Contributions:			€
WOZNIAK Tool & DIE Co.	In-Kind (describe)		3	
1			•	08/36/19
1424 S. WOZNIAK Rd.	Other Receipts:			
LAPORTE, IN 46350	Interest Loan Miscellaneous (specify)			DUANE
		20000	6,855.00	PARRY
Contributor's Occupation (if required) 5.	Contributions:	725005	6,000	, Alerey
LARRY Yodlowski	Direct			:
LATERY JOURNAL	☐ In-Kind (describe)			
2302 Shorewood DR.				09/11/19
Michigan City, IN 46360	Other Receipts:			D. 4. 12
d' '	Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		1,000.00	7,855.00	MARRY
	THIS PAGE OF SCHEDULE A	\$2200,00		
TOTAL OF ALL PAGES OF SCHEDULE		s		
(Enter total on II En	f 15a of the Summary Sheet.)	1		



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	
4	16-19-47	 .
Page _	6 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
Tony Childers	Contributions: Direct In-Kind (describe)			09/18/19
MICHIGAN CITY, IN 46360 TONY'S OUT DEAD MOTORS	Other Receipts: Interest Loan Miscellaneous (specify)		,,, ,, , , , , , , , , , , , , , , , ,	DUANE -
Contributor's Occupation (if required)		400.00	8,255,00	
DUANE A. PARRY	Contributions: Direct In-Kind (describe)			
Michigani City, IN 46360	Other Receipts: Intérest Loan Miscellaneous (specify)			09/26/19
Contributor's Occupation (if required)		750.00	9,005.00	DUANE PAREV
DUANE A. PARRY 2206 Maple Sti	Contributions: Direct In-Kind (describe) Other Receipts:		,	10/03/19
Michigan City, IN 46360	☐ Interest ☑ Loan ☐ Miscellaneous (specify)	750.00	9,755.00	DVANE
Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe)	730,00	7,733,00	PARRY
4128 E. Michigan Blud. Michigan City, IN 46360	Other Receipts: Interest Loan Miscellaneous (specify)			10/11/19 DUANE
Contributor's Occupation (if required)		200.00	9,955.00	
5 DUANE A. PARRY	Contributions: Direct In-Kind (describe)			
ZZOG Maple St. Michigan City, IN 46360	Other Receipts: Interest Loan Miscellaneous (specify)			10/16/19 DUBNE
Contributor's Occupation (if required)		300.00	10,255.00	PARRY
	THIS PAGE OF SCHEDULE A	\$ 2,400.00		
TOTAL OF ALL PAGES OF SCHEDULE / (Enter total on ITEN	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						
	46-1	19-4	7 20-			
Page	7.	of	7			

	· · · · · ·		·	
CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
FULL MAILING ADDRESS	OR OTHER RECEIPT	AMOUNT THIS	CUMULATIVE	(mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	, RECEIVED BY
1.	Contributions:	,		
	Direct			*. *
ANTHONY HENDRICKS	In-Kind (describe)			1-1-11-1
ANTHONY HENDRICKS 306 DECATUR ST.				· 10/21/19 =
SOU OCCAN CIC ST	Other Receipts:		214 B 1 2	Same and the
MICHIGAN CITY, IN 46360	interest Loan			•
	Miscellaneous (specify)	, ,	: "- <u>:</u> _	DUANE.
Contributor's Occupation (if required)	<u> </u>	200,00	10,455.00	Propy
2.	Contributions:	, .		7 7 7 7 7
•	Direct	•		•
DUANC A. PARRY	In-Kind (describe)		,	
		•		10/29/19
2206 Maple 5+	Other Receipts:			10]24/14
Michigan City, IN 46360	Intérest Loan		<u>.</u>	
January City, Co.	Miscellaneous (specify)			DUANE
		500.00	in arriva	PARRY
Contributor's Occupation (if required)		200.00	10,955.00	PARRY
3.	Contributions:			
	Direct	1		
	In-Kind (describe)			
		·		
· \	Other Receipts:			
	Interest Loan	•		
	Miscellaneous (specify)		·	_
Contributor's Occupation (if required)			_	,
4.	Contributions:			
	Direct			ĺ
	☐ In-Kind (describe)		1.	
\				
\	Other Receipts:			
\	Interest Loan			
	Miscellaneous (specify)			1
				-
Contributor's Occupation (if required)	Canada diana		<u>'</u>	<u> </u>
5.	Contributions:			
/	In-Kind (describe)			
/-	minute (peacine)	1		
/	Other Descriptor			·
/	Other Receipts:	1		
/	Miscellaneous (specify)			-
/	11 weacondrienna (aboutly)	•		
Contributor's Occupation (if required)				
SUBTOTAL .	THIS PAGE OF SCHEDULE A	\$ 700,00		
TOTAL OF ALL PAGES OF SCHEDULE				
	1 15a of the Summary Sheet.)	\$10,955.00		



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

State Indiana

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER		
4	6-19-47	
Page _	1 of //	

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)	PERIÓD	YEAR-TO-DATE	(mm/dd/yy)
The Cellular CONNECTION 5230 S. FRANKLIN ST.	Cell phone service Provider (Start Service)	Direct In-Kind Payment of Debt Returned Contribution Other			e se v v
Michigan City, IN	MANAG	FUR CAMPAIGN	34.10	34.10	02/02/19
WALMART 5780 FRANKLIN ST.	MAYOR RETAILER	☐ Direct ☐ In-Kind ☐ Payment of Debt. 1.99 ☐ Returned Contribution ☐ Other ☐ Purpose: Funchase			
Michigan City, IN	MAYOR	cell phone	42.67	76.77	03/02/19
Code	Cell phone service Provider	Poirect In-Kind Payment of Debt Returned Contribution Other Purpose: Cell phone	7V 10	110 57	02/02/9
TCC	MAYOR	Service	34.10	110,87	03/02/19
WALMART	Retailer	□ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other □ Purpose: Papee for	aur	120,34	12/02/19
Michigan City	MAYOR	HANDOUTS Direct In-Kind	7,-71	120,07	42,0-7.1
Reprographic ARTS Z8Z4 E. MichigAN Blvd. MichigAN Cry, IN	PRINTING & AppAREL SILKSCREENING MAYOR	Payment of Debt Returned Contribution Other Purpose: T-Shings Sor Campaign	120.00	240,34	03/07/19
HAWKINS PRINTING 315 LINCOLUMY LAPORTE, IN	PRINTERS	Poirect In-Kind Payment of Debt Returned Contribution Other Purpose: Campaign Bus. Caads	6634	306.68	03/07/19
Code (ALCO)	MAYOR LOCAL ACCESS Cable TV STATION	Direct In-Kind Payment of Debt Returned Contribution			
Access LAPAZTE COUNTY 301E, 8+165T. MICHIGAN CITY, IN	Mayor	Defension Show Show of St. Pats Prica		381.68	03/08/19
9	SUBTOTAL THIS PAG		\$.381.68		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the	he Summary Sheet.)	\$		
			ı	,	, As



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

State Indiana

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE NUMBER	
40	6-19-47	
Page	2 of 11	

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		☐ Direct ☐ In-Kind ☐ Payment of Debt	,		er transfer of
 	Danimana	Returned Contribution			
·	PRINTERS	Other			·
		Purpose: CAMPRIGN		_	ا , ,
HAWKINS PRINTING	Mayor	Flyers	300,00	681.68	03/14/19
Code	,	Direct In-Kind			
	CAMPAIGN HANDOUT MANUFALTURER	Payment of Debt 🔑			
Myshopangel.com	1-TARUACTURER	Returned Contribution Other			
	•				. , }
BALLSTON LAKE, NY	Mayor	Purpose: CAMPAIGN BAGS & HANDOUT	681.80	1,363.48	03/18/19
	Mayor	Direct In-Kind			
Code	-	Payment of Debt			
p , o	PRINTERS	Returned Contribution	•		
Beacher PRINTING		Other			
911 FRANKLIN ST.			اس. د	الريد لريارين	ا مرابع واصد
MichigAN City, IN	MAYOR	Purpose: CAMPAIGN BUS. CARDS	52,47	1,415.95	03/22/19
l h		☐ Direct ☐ In-Kind			
Code		Payment of Debt			
AQUARIAN PROMOTIONS	SIGN MAKER	Returned Contribution			
2710 FRANKLIN ST.	J	Durpose: Sign letters			
	Aday-		100-00	1,515.95	04/01/19
MICHIGAN CITY, IN	MAYOR Cell phone service	Direct In-Kind	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,5,4,1,5	
Code	Cell phone service	Payment of Debt		·	
	Provider:	Returned Contribution			
_		Other			
40.4		Purpose:	21/10	الريد درسار	oularly
TCC	MAYOR		34.10	1,550.05	04102111
Codo	'	Direct In-Kind			
Code		Payment of Debt			
GRANTHAM AIRBRUSH	SIGN MAKER	Returned Contribution			}
	7	Purpose: Update			
1122 W. 1000 N	MAYOR	OLD BANDAIGN SA	JUS 51,00	1601-05	04/03/19
LA PORTE, IN	1-11902		,	1	-
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt .			
	Partie	Returned Contribution			
	PRINTERS	Other			
		Purpose: Rubber			Į
11		STAMP & PRINTIN	9 28.89	1629.94	04/05/19
HAWKINS PRINTING	MAYOR		<u>. </u>	1,6001.17	0 1/00/11
9	SUBTOTAL THIS PAG		\$1,248.26		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$		
	(Enter total on ITEM 17a of ti	ne summary Sneet.)			



caucus, political ection, or regular party committees) MUST be itemized on this schedule.

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

State Indiana

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER		
46-19-47		
Page 3 of //		

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	YEAR-TO-DATE	(mm/dd/yy)
·		☑ Direct ☐ In-Kind			The second
Code		Payment of Debt			
4)	RETAILER	Returned Contribution			
WALMART		Other			
LINCOLNINAY	A 2	Purpose: CAMPAIGN	19.17	1649.11	04/04/19
LAPORTE, IN	MAYOR	MATERIAL	19.17	1,671-11	0 1,0 1,1
Code		Direct In-Kind			:
	Building Supply Store	Payment of Debt 🥂			
Menneds	70,70	Other			
5260 S. FRANKUN ST.	· ·		,	```	
MichigAN City, IN	MAYOR	Purpose: CAMPAIGN SIGN POSTS	31.85	1,680.96	04/08/19
7	,	☐ Direct ☐ In-Kind			
Code	Cable	Payment of Debt	i		
	ACCESS TV STATION	Returned Contribution			
	·	Other			
ALCO	Mayor	Purpose: Sponsor Lq. Women Voters	75,00	1,755.96	04/16/19
11200	•	7			
Code	Cell phone Service	☐ Direct ☐ In-Kind ☐ Payment of Debt			
	Provider	Returned Contribution			
		Other			
		Purpose: Cell phone	H2 90	1400 41:	arlas 110
TCC	MAYOR	SCRVICE UpgRade	43,80	1,799.76	03/04/1
Code	Cable	☑ Direct ☐ In-Kind		,	
	Access TV STATION	Payment of Debt			
	ACCESS 1 V STATION	Returned Contribution Other			
į		Purpose: Sponson			
ALCO	MAYOR	HEHORIAL DAY PARA	le75.00	1,874.76	05/24/19
		Direct In-Kind			
Code		Payment of Debt			
WIMS RADIO STATIO	N KARIOSTATION	Returned Contribution			
685 E. 1675 N		Other			
Michigan City, IN	MAYOR	Purpose: CAMPAIQN COMMERCIAYS	62.50	1,937.26	06/13/19
	,	54. . 5		2	-
Code	CAMPAIGN HANDOUT	Payment of Debt			
, , ,	MANUFACTURER	Returned Contribution	!		
Myshopangel		Other			
Ballston Lake, NY		Purpose: CAMPRIGN	ارما		L. lielie
	MAYOR	BAGS & MAGNETS	950.00	2,887.26	06/18/19
	SUBTOTAL THIS PAG	E OF SCHEDULE B	\$1,257.32		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$		
	(Enter total on ITEM 17a of the	ne Summary Sheet.)			



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER
46-19-47
Page

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
Code	PRINTERS	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution			
HAWKINS PEINTING	MAYOR	Other Purpose: PRINTECL AMPRIGN Flyers	321.00	3,208.26	07/02/19
Code	Cell phone Service Peovider	Direct In-Kind Payment of Debt Returned Contribution	٠.		-
Tec	MAYOR	Purpose: Cell phone Seavice	43,90	3252.06	07/02/19
Code	Cell phone Service Peovidee	Direct In-Kind Payment of Debt Returned Contribution			
TCC	MAYOR	Purpose: Cell phone SERVICE	43,80	3,295,86	06/02/19
WE FM RADIO	LOCAL FM RADIO STATION	ir-Kind Payment of Debt Returned Contribution			
Michigan City, IN	Mayor	Purpose: Padio Conneccials	350.00	3,645.86	07/09/19
- Code	Campaign Handout Manufacturer	☐ Cirect ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution			
Myshopangel Ballston Lake, NY	Mayor	Purpose: Chmpaigh Handours	316.36	3,962.22	07/09/19
Code	PRINTERS	Payment of Debt . Returned Contribution Other			
BEACHER PRINTING	Mayor	Purpose: CAMPAIGH HANDOUTS	217.81	4,180.03	07/15/19
Code	Cable Access TV	☐ Payment of Debt ☐ Returned Contribution ☐ Other	·		
ALCO	MAYOR	Purpose: Sporsor PATRION C DAY PARAde	75.00	4,255.03	07/19/19
	SUBTOTAL THIS PAG		\$1367.77		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the	he Summary Sheet.)	\$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE NUMBER	
46	-19-47	
Page _	5 of 11	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	YEAR-TO-DATE	(mm/dd/yy)
Code	Cell plione Service provider	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other	·		N the A Y
TCC	Mayor	Purpose: Cell phowe Service	43.80	4,298.83	68/02/19
Code	PRINTERS	☐ Direct ☐ In-Kind ☐ Payment of Debt → ☐ Returned Contribution ☐ Other			
HAWKINS PRINTING	MAYOR	Purpose: CAMPAIQUE HANDOUTS	360.00	4658.83	08/20/19
Code	SIGN MAKERS	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other			
Reprographic ARTS	MAYOR	Purpose Campaign Signsy	370.50	5,029.33	08/30/19
STATION 801	RESTAURANT	☐ Birect ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution			
801 FRANKLIN ST. MICHIGAN CITY, IN	Mayor	OtherPurpose: CAMPAIGN COMMITTEE PHOSE	4629	5,075.42	08/19/19
OFFICE MAX	Office Supplies	Direct In-Kind Payment of Debt Returned Contribution		•	
FRANKLIN ST. MICHIGAN CITY, IN	MAYOR	Purpose: CAMPAIAN Supplies	19.25	5,094.67	08/23/19
Code	Building Supplies	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other			
Menards	Mayor	Purpose: CAMPAIGN SAN POSTS	117.23	5,211.90	08/26/19
Code	Cell phone Service Provider	Poirect In-Kind Payment of Debt Returned Contribution			
TCC	Mayor	Dother Purpose: Cell phone Service	43.80	<i>5,255.</i> 70	09/02/19
	SUBTOTAL THIS PAG	E OF SCHEDULE B	\$1,000.67		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)		\$			



State Indiana

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER
46-19-47
Page 6 of 11

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)
		Direct In-Kind			res para e t
Code	<i>O</i>	Payment of Debt			
	PRINTERS	Returned Contribution Other			
HAWKINS PRINTING	Mayor	Purpose: PRINTED BUS. CARDS	68.21	5,323,91	69/09/19
Code		Direct In-Kind		,	
12.1.4	RETAIL	Payment of Debt A			
WALMART		Other			
LINCOLNWAY LAPORTE, IN	MAYOR	Purpose: CAMPAIAN Supplies	20.17	5,344.08	09/03/19
Code	. '	Direct In-Kind			
	SOCIAL MEDIA	Payment of Debt Returned Contribution			
		Other			
FACEBOOK	MAYOR	Purpose: INTERNET CAMPAIQU	7.11	5,351.19	09/03/19
		☐ Direct ☐ In-Kind			
Code	RETAIL	Payment of Debt			
WALMART	LE/AII	Returned Contribution Other			
LINCOLNWAY LA PORTE, IN	MAYOR	Purpose: CAMPAIGN Supplies	22.76	5,373,95	09/09/19
Code		☑ Direct ☐ In-Kind			er in the
	Building Supplies	Payment of Debt			
Lowes					
FRANKLIN ST.	1 1 1 1 1 1 1	Purpose: Sigu MATERIALS	5757	5,431.47	09/12/19
MICHIGAN CITY, IN	MAYOR	MATERIAIS Direct In-Kind	37.30	المار ارك	. ,, ,, ,,
Code		Payment of Debt			
	Building Supplies	Returned Contribution		,	
)	Durpose: SIGN			ا مراسلون
Menards	Mayor	MATERIALS	37,30	5,468.77	04/13/14
Code	*	Direct In-Kind			
	See Ada Jooc	Payment of Debt Returned Contribution			
	SIGN MAKERS	Other	,		
_		Purpose: CAMPAISN			Jake Lo
Reprographic ARTS	MAYOR	Signs Signs	450.00	5,918.77	04/16/14
, , ,	SUBTOTAL THIS PAG		\$ 663,07		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of ti	E LAST PAGE ONLY he Summary Sheet)	\$		
·	Line was on the tra or a	Jannay Ondou			



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE	NUM	BER	
40	6-19	7-4	7	
Page_	7	of _	//	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	YEAR-TO-DATE	(mm/dd/yy)
		☑ Direct ☐ In-Kind			the state of the
Code		Payment of Debt			
	SOCIAL MEDIA	Returned Contribution Other			
,	. ,	Purpose: INTERNET	٧. ٨	102777	00/22/19
FACEBOOK	MAYOR	CAMPAIGN	3.00	5,923,77	01123111
Code	,	Direct In-Kind		,	
	Retail	Returned Contribution			
WALMART		Other			
LINCOLNWAY LAPORTE, IN	MANDR	PUTPOSE: CAMPAIGN	46.21	5,969.98	09/25/19
	MAYOR	☐ Direct ☐ In-Kind			
Code	Da Tage	Payment of Debt			
	PRINTERS	Returned Contribution Other			
		Purpose: Business		101102	09/26/19
HAWKINS PRINTING	MAYOR	CARds	41.94	6,011.92	09126114
Code	,	☐ Cirect ☐ In-Kind			
	SIGN MAKERS	Payment of Debt Returned Contribution			
	4	Other			
Reprographic ARTS	MAYOR	Purpose: CAMPAIGN SIGNS	240.00	6251.92	09/27/19
Code		Grect In-Kind		•	na general
	POSTAL SERVICE	Payment of Debt Returned Contribution			
U.S. Post Office	700, 20-0	Other			
LINCOLNINA	Marian	Purpose: Postage	33.00	6,284.92	09/27/19
LA PORTE, IN	MAYOR	STAMPS	33.00	<i>10,001.10</i>	
Code		Direct In-Kind Payment of Debt			
Vouse Belie Aim	OFFICE Supplies	Returned Contribution			
Kemps Office City Lincolnway	, ,	Other			
LA PORTE, IN	MAYOR	ENVelopes	7.16	6292.08	09/30/19
		Direct In-Kind			
Code		Payment of Debt			
WIMS RADIO	RADIO STATION	Returned Contribution Other			
685 E. 1675 N		Purpose:			
Michigan City, IN	MAYOR	RADIO COMHERCIALS	1059.00	7,351.08	10/10/19
	SUBTOTAL THIS PAG		\$ 1432.31		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON THE (Enter total on ITEM 17a of t	E LAST PAGE ONLY	\$		
	Einer total on them in a or to	The section of the section of			
				,	, ika



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER
46-19-47
Page 8 of //

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
WE FM RADIO Springland Ave. Michigan City, IN	RADIO STATION	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Radio Commercials	400.00	7,751.08	10/06/19
Code	Cell phone Service Provider	☐ Direct ☐ In-Kind ☐ Payment of Debt A' ☐ Returned Contribution ☐ Other Purpose: Cell phone	<i>43.</i> 80	7,794.88	10/02/19
Code	MAYOR SIGN MAKER	Service Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Lettening \$ Signs		7,944.88	,
AQUARIAND PROMOTIONS Code HAWKINS PRINTING	PRINTERS	Purpose: Park		8,091.13	
WIMS RADIO	RADIO STATION MAYOR	□ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other □ Purpose: Political Conneccials	& 7.50	8,178.63	10/31/19
Face book	Social Media Mayor	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Tate Rue T	25.00	8203.63	10/06/19
Code		CAMPAIGN Direct In-Kind Payment of Debt Returned Contribution			
U.S. Post Office Lincolnway	POSTAL SERVICE	OtherPurpose:	44.00	8247.63	10/06/19
LA PORTE, IN	MAYOR SUBTOTAL THIS PAGE	STAMPS SE OF SCHEDULE B		OKTIO	
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of to	LAST PAGE ONLY	\$ 896.55 \$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER	
46-19-47	
Page 9_ of 11	

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)
		☐ Direct ☐ In-Kind		`,	No. 10 to 10
Code		Payment of Debt			
Venna Affice Com	OFFICE Supplies	Returned Contribution Other			
Kemps Office City		Purpose: CAMPAISA	m : /	e16479	. 1 /0
LA PORTE, IN	MAYOR	Supplies	7.16	8,254.79	10/11/19
Code	•	Direct In-Kind			
	SOCIAL Media	Payment of Debt 🗳	•	,	
·		Other			
Fuchani	Maria	Purpose: INTERNET	4.65	8,259,44	10/21/19
FACEBOOK	MAYOR	CAMPAIGN	7720	37 **	
Code		☐ Direct ☐ In-Kind			
1	PRINTERS	Returned Contribution		·	,
		Other			
HAWKINS PRINTING	MAYOR	Purpose: CAMPAIGN HANDOUTS	107.00	8,366,44	10/24/19
	/	Direct In-Kind			
Code		Payment of Debt			
	SOCIAL MEDIA	Returned Contribution			
		Purpose: Twrequet			,
FACEBOOK	MAYOR	CAMPAIGN	25.00	8,391,44	10/28/19
	1	Direct In-Kind	,		
Code	Social Media	Payment of Debt			
	OUTAT PIEUTA	Returned Contribution Other			
		Purpose: INTERNET	٠ ـ س		1-0/0
FACEBOOK	Mayor	CAMPAIGN	25.00	8,416.44	10/28/19
Code		☑ Direct ☐ In-Kind			
	SOCIAL MEDIA	Payment of Debt Returned Contribution			
	000,777	Other			
to have	A de sia	Purpose: INTERNET	35.00	אנונו וייינוס	1. Inches
FACEDOOK	MAYOR	CAMPAIGN	25,00	8451.44	10/68/19
Code	Buldina	Direct In-Kind			
	Building Supplies	Payment of Debt Returned Contribution			
	Supplies_	Other			
		Purpose: Sign			
Lowes	MAYOR	MATERIALS	30.25	8481.69	10/28/19
	MAYOR SUBTOTAL THIS PAGE		\$ 234,06		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$		-
	(Enter total on ITEM 17a of to	he Summary Sheet.)	Ψ		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE	NUM	BER	
4	6-19	7-4	47	
Page	10	of _	11_	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
Code		☑ Direct ☐ In-Kind			w an
	Social Media	Payment of Debt Returned Contribution			
	OBETAT TIERTA	OtherPurpose: INTERNET			
FACEBOOK	MAYOR	CAMPAIGN	50.00	8531.69	10/30/19
Code	•	Direct			
	Social Media	Returned Contribution			
		Purpose: ILUTEANET			
FACEBOOK	MAYOR	Chmpaign	75.00	8,606.69	10/31/19
Code	Cell phone	Direct In-Kind Payment of Debt			
	Service Provider	Returned Contribution			
700		Durpose: Cell phone			11/2 1/10
TCC	Mayor	Service	43.80	8,650.49	11/02/19
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
. ~ .	RADIO STATION	Returned Contribution Other			
WIMS RADIO		Purpose: Radio	4-7	د 110 مرسره د 110 مرسره	ustantia
Michigan City	MAYOR	COMMERCIALS Direct In-Kind	260.00	8,850.49	11407117
· Code	D La Coma	Payment of Debt			
WIMS RADIO	RADIO STATION	Returned Contribution Other	,		
Michigan City	11010	Purpose: Live Radio	87.50	8,937,99	11/05/19
Michigan City	MAYOR	COMMERCIAL Wirect In-Kind		0,101211	7770-7-1
Code	RADIO STATION	Payment of Debt			
WEFM RADIO	ICACIO CIATION	Returned Contribution Other			
Michigan City	MAYOR	Purpose: Political COMMERCIALS	190.00	9,127.99	11/13/19
	,,	☑ Direct ☐ In-Kind			
Code	6 1111	Payment of Debt Returned Contribution			
	SOCIAL Media	Other			
		Purpose: INTERNAT	7/ *^	9,202.99	11/11/19
FACEBOOK	MAYOR SUBTOTAL THIS PAG	CAMPAIGN	75.00	7,202.77	11/01/17
TOTAL OF ALL PA	SUBTOTAL THIS PAG AGES OF SCHEDULE B ON THE	E OF SCHEDULE B	\$ 721.30		
101AL OF ALL F	(Enter total on ITEM 17a of to	he Summary Sheet.)	\$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER
46-19-47
Page // of //

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, zir code)	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
FACE BOOK	Social Media Mayor	Direct in-Kind Payment of Debt Returned Contribution Other Purpose: The Reserve	125.00		11/04/19
Code	Social Media	CAMPAIGN Direct In-Kind Payment of Debt 19 Returned Contribution Other Purpose: Turrequer		9502.99	
FACE BOOK	MAYOR SOCIAL MEDIA MAYOR	Campaign □ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other □ Purpose: Target per			
FACEBOOK	MAYOR	CAMPRIGN Direct In-Kind	110.48	9,613.47	11/21/19
Code		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		\$ 410.48		
TOTAL OF ALL PA	\$9,613,47		-		



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.

#6-19-47
Page 1 of 2 1

· · · · · · · · · · · · · · · · · · ·				رگ	18 16/2L/19
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
DUNNE A. PARRY 2206 Maple ST. MUCHIGAN CITY, IN LENDERS OCCUPATION: 46560	CITIZENS FOR DUANE PARRY	150.00			
LENDER'S OCCUPATION:		LOAN	03/14/19	150.00	150.00
	CITIZENS FOR	250.00			
DUANE A. PARLY	DIANE PARRY	LOAN	03/28/19	400.00	400.00
	Citizens For	100,00			,
DUANE A. PARRY	DUANE PARRY	LOAN	63/28/19	500.00	500.00
	Crrizeus Fie	1,000.00			
DUANE A. PARRY	DUANC PARRY	LOAN	05/29/19	1,500,00	1,500.00
	CITIZENS FOR	400.00	-		
DUANE L. PARRY	DUANE PARRY	LOAN	06/21/19	1,900.00	1,900.00
	CITIZEUS FOR	800.00			
DUANE A. PARRY	DUANE PARRY	LOAN	07/26/19	2,700.00	2,700.00
	CITIZENS FOR	750.00			
DUANE A. PARRY LENDERS OCCUPATION	CITIZENS FOR DUANE PARRY	LOAN	10/3/19	3450.00	3,450.00
		SUBTOT	AL THIS PAGE	OF SCHEDULE D	\$3,450.00
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.)					

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 | 1

OF

(CFA-4) Summary Sheet

Summary Sheet
FILE NUMBER
46-19-47

TOTAL PAGES IN ENTIRE CFA-4 REPORT

20

COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization) Check if this is a new	name.			
CITIZENS FOR DUANE PARRY	•			
2. Acronym or Abbreviated Name (if any)	3. Commi	ttee Telephone Number		
11/4	(219) 873-63 0		
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check if this	is a new address.		
2206 Maple ST. 5. City, State, ZIP Code	1	ffiliation (if applicable)		
Michigan City, IN 46360	1	publicaN		
CANDIDATE INFORMATION (For Candidate's C			- "	
7. Full Name of Candidate (Include any nickname.)		Affiliation or If Independent Candidate		
DUANE ARTHUR PARRY	Kep	ublicaN		
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	I	y of Residence		
Mayor of Michigan City		orte	N CANDIDATES ONLY	
TYPE OF REPORT	* * * * * * * * * * * * * * * * * * * *	CONVENTIO	N CANDIDATES UNLY	
11. Check one.		Check one:		
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conv		
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend Sta	atement of Organi	zation.) Dost-Cor	ivention	
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B Year to Date	
From: 4/13/19 . Through: 11/21/19		This Period	real to Date	
13. Cash on hand and investments at the beginning of this reporting period.		614.44		
14. Cash on hand and investments January 1, current year.		Add Rand Chic	614,44	
CONTRIBUTIONS AND RECEIPTS	11-19-11-11 S			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		0104 70	14005 70	
15a. Itemized (Use Schedule A.)		9,190-18	14,945.18	
15b. Unitemized	TOTAL	010479	18,995,78	
130. Add lines for and for in boar columns.	TOTAL	9,196,78	/ / /	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	9,8¢5.22	11.610-22	
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)			0 (15)(5	
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		-7,485.5 3	9,613.4	
17b. Uniternized	TOTAL	<i>Φ</i>	011717	
	BTOTAL	<u> 9,983,53</u>		
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	1,821.69	1,996,75	
19. Debts OWED BY the committee (Use Schedule D.)		<i>3,450.00</i>		
20. Debts OWED TO the committee (Use Schedule E.)	·	- H		
CERTIFICATION	111	N CHECKER PROPERTY.		
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	TRUE, CORRE			
Signature of Treasurer Title		te (mm/dd/yy)	N 2 2000	
Quane a. Varry TREASURER		1021000	OV 2 2020	
Signature of Candidate (if applicable)		te (mm/dd/yy)		
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose	. (IC 3-9-4-51 A	person who knowingly	Konjuge Awleck	
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 accur	rate report as r	equired by the India BK OF	LÁ PORTE CIRCUIT COUR	
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)	9-4-16, IC 3-9 - 4	-17, IC 3-9-4-18)		



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

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

Itemized Contributions and Other Receipts

FILE NUMBER				
4	6-1	9-4	7	,
Page	1	of	7.	

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
FULt. MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1. RICHARD GRAMLROSSA	Contributions: Direct In-Kind (describe)			03/03/19
335 LAKE HILLS Rd. MICHIGAN CHY, IN 46360	Other Recelpts: Interest Loan Miscellaneous (specify)	500.00	500,00	Duane
Contributor's Occupation (if required)	Contributions:			
RICHARD GRAMAROSSA	Direct In-Kind (describe)			03/09/19
355 LAKE HILLS Pd. Michigau City, IN 46360	Other Receipts: Interest Loan Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		285.00	785.00	PERRY
3.	Contributions: Direct			
DUANE A. PARRY	In-Kind (describe)			03/11/19
2206 Maple ST. Michigan City, IN 46360	Other Receipts: Interest Loan Miscellaneous (specify)	45	885.00	DUANE
Contributor's Occupation (if required)		100.00	885.00	PARRY
:	Contributions: Direct In-Kind (describe)		:	03/12/19
Various Sources Contributor's Occupation (If required)	Other Receipts: Interest Loan Miscellaneous (specify)	70,00	955.00	DUANE PARRY
5.	Contributions:	·		
DUANE A. PARRY	☐ Direct☐ In-Kind (describe)	(*)		03/14/19
2206 Maple ST. Michigan City, IN 46360	Other Receipts: Interest Loan Miscellaneous (specify)	150.00	1,105.00	DUANE PARRY
Contributor's Occupation (if required)			,	IAKNY
SUBTOTAL T TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$ 1,105,00		
Enter total on ITEM	15a 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				
	46-1	9-4	7	•
Page _	2	of	7	

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.	Contributions:			
The state of the s	Direct In-Kind (describe)			
DUANE SEIFERT		,		63/15/19
4066 W. Schultz Rd.	Other Receipts:			
LAPORTE, IN 46350	Interest Loan Miscellaneous (specify)			DULDE
Contributor's Occupation (if required)		100.00	1,205.00	PARRY
2.	Contributions:			
DUANE A. PARRY	Direct		,	
2206 Maple ST.				03/28/19
MICHIGAN CITY, IN 46360	Other Receipts: Loan			
4	Interest Loan Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		250.00	1,455.00	PARRY
3.	Contributions:			
John Hendricks	Direct In-Kind (describe)			
,				03/28/19
ZOO E. Coolspring AVE.	Other Receipts:			
Michigan City, IN 46360	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)	· .	200,00	1,655.00	PARRY
4.	Contributions:			
DUANE A. PARRY	☐ Direct☐ In-Kind (describe)			
2206 Maple St.				03/28/19
Michigans City, IN 46360	Other Receipts:			_
,,,,,	Miscellaneous (specify)	·		DUANE
Contributor's Occupation (if required)	<u></u>	100.00	1,755.00	PARRY
5.	Contributions:	·		
VARIOUS SOURCES	☐ Direct ☐ In-Kind (describe)	<i>C</i>		
VARIOUS - CICUD				63/28/19
·	Other Receipts:			
	Miscellaneous (specify)	·		DUANE
Contributor's Occupation (if required)		50.00	1,805,00	DUANE PARRY
SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$ 700.00		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY 15a 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

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 seles, 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	NUMBE	R	
4	46-1	9-47	7	
Page _	3	of	7_	

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.	Contributions:			
During A Paris	☐ In-Kind (describe)			,
DUANE A. PARRY		,		63/29/19
2206 Maple St.	Other Receipts:			
Michigan City, IN 46360	Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		250,00	2,055.00	PARRY
2.	Contributions:			l.
Genald Fedorchax JR.	In-Kind (describe)			
507 OUTLOOK COVE DR.				05/06/19
LAPORTE, IN 46350	Other Receipts: Interest Loan			
2, 3, 3	Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		100.00	2,155.00	PARRY
3.	Contributions: Direct			
DUANE A. PARRY	In-Kind (describe)			05/22/19
2206 Maple St.	Other Receipts:			,
MICHIGAN CITY, IN 46360	☐ Interest ☐ Loan☐ Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		1,200.00	3,555.00	PARRY
4.	Contributions:			
DUANE A. PARRY	In-Kind (describe)			
2206 Haple ST.		;		05/29/19
Michigan City, IN 46360	Other Receipts: Interest Loan			5
O ,	Miscellaneous (specify)		11-4-2	DUANE Pros
Contributor's Occupation (if required)		1,000.00	4,355.00	PARRY
5.	Contributions: Direct			
	☐ In-Kind (describe)		İ	1-1-1-
VARIOUS Sources	Other Receipts:		-	05/31/19
VARIOUS ESC.	Interest Loan			7
	Miscellaneous (specify)	100.00	4455.00	DUANE PARRY
Contributor's Occupation (if required)			7,733.00	1 AIRILY
SUBTOTAL T TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$ 2,650.00		
(Enter total on ITEM	15a of the Summary Sheet.)	\$		ļ.



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

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE NUMBER	
4	46-19-47	_
Page	4of 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
DUANE A. PARRY	Contributions: Direct In-Kind (describe)			06/21/19
2206 Maple ST. Michigan Cry, IN 46360	Other Receipts: Interest Loan Miscellaneous (specify)			14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Contributor's Occupation (if required)	<u> </u>	400.00	4,855.00	PAREY
BARBARA J. PARRY	Contributions: Direct In-Kind (describe)	· · · · · · · · · · · · · · · · · · ·		
2206 Maple ST. Michigan City, IN 46360	Other Receipts: Intérest Loan Miscellaneous (specify)			06/24/19
Contributor's Occupation (if required)	ivisceraneous (specify)	350.00	5,205.00	DUANE PARRY
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts:	•		67/01/19
Various Sources	☐ Interest ☐ Loan☐ Miscellaneous (specify)		,	DUANE
Contributor's Occupation (if required)		50.00.	5,255.00	PARRY.
4.	Contributions: Direct In-Kind (describe)			67/12/19
VARIOUS Sources	Other Receipts: Interest Loan Miscellaneous (specify)			Duane
Contributor's Occupation (if required)	·	100.00	5355.00	PARRY
5.	Contributions: Direct In-Kind (describe)			t
VARIOUS Sources				07/26/19
VETERANS FROM AMERICAL LEGION POSTS 374451	interest Li Loan			DUANE
MICHIGAU CITY, IN Contributor's Occupation of required)	Miscellaneous (specify)	300.00	5,655.00	PARRY
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 1,200.00		
TOTAL OF ALL PAGES OF SCHEDULE / (Enter total on ITEN	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

Indiana

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER
46-19-47
Page _ 5 _ of _ 7

2		1		
CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
FULL MAILING ADDRESS	OR OTHER RECEIPT	AMOUNT THIS	CUMULATIVE	(mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
	Direct			
DUANE A. PARRY	In-Kind (describe)			
,			· ·	07/20/19=
2206 Maple ST.	Other Receipts:		en e ar S	
MichigAN City, IN 46360	│	•	****	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Miscellaneous (specify)		2 tu.	DUANE
Contributor's Occupation (if required)		800.00	6455.00	PARRY
	Contributions:	000,00	-/	1 Hickory
2	Contributions:			,
	I _			juga gar
DUANE A. PARRY	In-Kind (describe)	,		
2206 Maple ST.			`.	08/06/19
2200 MAPPIE G.	. Other Receipts:	·		21.4
Michigan City, IN 46560	Intérest Loan		A15 5 1	
9	Miscellaneous (specify)	,		DUANE
		150.00	6605.00	Ξ
Contributor's Occupation (if required)		130.00	4003.00	PARRY
† 3 .	Contributions:			
	Direct :			
Services of the services of th	in-Kind (describe)			
	·	, .	1 î.	08/21/19
	Other Receipts:		. "	0010.7.7
VARIOUS SOURCES	☐ Interest ☐ Loan			
VARIOUS, DOUBLES	Miscellaneous (specify)			DUANE
		50.00	ارد،	-
Contributor's Occupation (if required)		30.00	6,655.00	PARRY
4	Contributions:	·		C
	(** *
WOZNIAK Tool & DIE Co.	In-Kind (describe)		٠.	-
				08/36/19
1424 S. WOZNIAK Rd.	Other Receipts:		•	
LAPORTE, IN 46350	Interest Loan	4.		_
LATURIE JUNG 4002	Miscellaneous (specify)			DUANE
•		- 700 - 6	المدير المستوي الم	72
Contributor's Occupation (if required)		20000	6,855.00	PARRY
5.	Centributions:			
Lipau Vadlowski	Direct			
LATERY TOUTOUR	In-Kind (describe)			
LARRY Yodlowski 2302 Shorewood DR.				09/11/19
Michigan City, IN 46360	Other Receipts:] .		
MICHIGAN CITY, EN 1000	Interest Loan			Dunie
7	Miscellaneous (specify)			VUANE
Contributor's Occupation (if required)	<u> </u>	1,000.00	7,855.00	DUANE Parry
	THIS PAGE OF SCHEDULE A		<i>t</i>	<u> </u>
TOTAL OF ALL PAGES OF SCHEDULE A		\$2,200,00		
	15a of the Summary Sheet.)	\$		
		<u> </u>		



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

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

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be Itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER
46-19-47
Page 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.	Contributions:	,		
Toxy Childres	In-Kind (describe)			e galleria e
114 W. 4+h ST.				09/18/19 =
	Other Receipts:			
Michigan Cry, IN 46360	Interest Loan			
Tony's Outboard MOTORS	Miscellaneous (specify)			DUANE-
Contributor's Occupation (if required)		400.00	8,255.00	PARRY
2	Contributions:		· · ·	er ender
DUANE A. PARRY	In-Kind (describe)	-	. "	
2206 Maple ST		}	<u>.</u>	09/26/19
į ·	Other Receipts:		5.	
Michigan City, IN 46360	Intérest Lacan		-	
	☐ Miscellaneous (specify)	٠ .	ا سیما	DUANE
Contributor's Occupation (if required)	·	750.00	9,005.00	PARRY
3 .	Contributions:			
DUANE A. PARRY	n-Kind (describe)		1 5 - 27	- 2
2206 Maple ST,			· - 1	10/03/19
· · · · · · · · · · · · · · · · · · ·	Other Receipts:		٠	
Michigan City, IN 46360	☐ Interest ☑ Loan ☐ Miscellaneous (specify)			DVANE
		750.00	۵۵ سیسر ۹۵	· - 1
Contributor's Occupation (if required)	0	/50.00	9,755.00	PARRY
4.	Contributions: Direct			
Edward ShiNN	☐ In-Kind (describe)		٤.	
4128 E. Michigan Blud.			·	10/11/19
7,20 2.710.11	Other Receipts:			
Michigan City, In 46360	Miscellaneous (specify)			DUANE
		200.00	9,955,00	
Contributor's Occupation (# required)	Contributions:	200700	1,700	PARRY
	Direct			
DUANE A. PARRY	☐ In-Kind (describe)			,
7206 MADIE 3T.				10/16/19
Muhan Cow Th	Other Receipts:			
Michigan City, IN 46360	Miscellaneous (specify)			DUANE
		300.00	10,255.00	DUANE PARRY
Contributor's Occupation (if required)	THE BACE OF SCHEDULE A			<u> </u>
	THIS PAGE OF SCHEDULE A	\$ 2,400,00		
TOTAL OF ALL PAGES OF SCHEDULE A	15a 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

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FILE NUMBER						
4	6-1	9-4	7_	-		
Page	7	of	7			

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	(mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
ANTHONY HENDRICKS	Direct In-Kind (describe)	,		10/21/19
306 DECATUR ST.	Other Receipts:		·	-, 0, 0, 1, 1
Michigan City, IN 46369	Interest Loan Miscellaneous (specify)			DURNE
Contributor's Occupation (if required)		200.00	10,455.00	PARRY
DUANE A. PARRY	Contributions: Direct In-Kind (describe)			
2206 Haple ST.	Other Receipts:	+	-	10/29/19
Michigan City, IN 46360	Interest Loan Miscellaneous (specify)			DUANE
Contributor's Occupation (if required)		500.00	10,955.00	PARRY
3	Contributions:			·
DUANE A. PARRY Elections COMMITTEE (CASH ON HAND AT COMMITTEE (Close of 2015 Whad Council Com 2206 Maple ST)	Direct In-Kind (describe)			
COMMITTER Close of 2015				10/19/19
2206 Maple ST		,		DUANE PARRY FOR
Michigan City, IN 46360	Miscellaneous (specify)	40,78	10,995.78	· · · ·
Contributor's Occupation (if required)	Contributions:		<u> </u>	COMENTAL
4.	☐ 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)			
Contributor's Occupation (if required)		-		
	THIS PAGE OF SCHEDULE A	\$ 740.78		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITER	A ON THE LAST PAGE ONLY A 15a of the Summary Sheet.)	\$ 10,995.78		

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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE NUMBER	
40	6-19-47	
Page	f of //	_

Code (TCC) Cell phone service Poince In-Kind Payment of Debt Returned Contribution Other Payment of Debt	RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
Code (TCC) Cell phone service Provider In-Kind Payment of Debt Payment of Debt Payment of Debt Provider Service) Returned Contribution Other Purpose: Cell phone For Company 34-10 34.10 02/02/19 Code Returned Contribution Payment of Debt A Payment of Debt A Payment of Debt A Payment of Debt A Payment of Debt A Payment of Debt A Payment of Debt A Payment of Debt A Payment of Debt A Payment of Debt A Payment of Debt A Payment of Debt A Debt	(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)				EXPENDITURE (mm/dd/yy)
The Cellular Connection Provider (Service) Returned Contribution 5230 S. FRANKUN ST. MICHIGAN CITY, IN MAYOR FOR CAMPAIGN 34.10 34.10 Code		all ale la conven	☑ Direct ☐ In-Kind			40 2 2
S230 S. FRANKLIN ST. MICHIGAN CITY, IN MAYOR FOR CAMPAIGN 34.10 34.10 34.10 OZ/02/19 Code Code Code RETAILER Returned Contribution Other FOR CAMPAIGN OZ/02/19 Code Payment of Debt 1" Returned Contribution Other Purpose: PLAC (20.5)	(CC)	_ ' . /.Sma m \ \	1 '			
Purpose: Cell phone Michigan City, IN Mayor FOR CAMPAIGN 34.10 34.10 34.10 34.10 02/02/19 Code	PROVIDER (SERVICE)	! =] .	
Code Prince In-Kind Payment of Debt 1,1 Returned Contribution Other Purpose: PLACE PASE	1	'				1 1 1 1
Code Retailer Payment of Debt 1/2 Returned Contribution Other Purpose: PLACE Payment of Debt 1/2 Payment of Deb	Michigan City, IN	MAYOR	FOR CAMPAIGN	34.10	34.10	02/02/19
WALKIART 5780 FRANKLIN ST. RETAILER Payment of Debt 1. Other Purpose: PLAC (2.58)	Code	,	l . ':			
5780 FRANKLIN ST. Purpose: PLACHASE		ReTailer	1 = ' '		·	
$\begin{bmatrix} 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 $, , , , , , , , , ,	1 =			
		•	Purpose: Purchase	1/2/7	7/77	02/02/18
	Michigan City, IN	MAYOR	cell phone	42.61	10,10	03 02 11
Code Code Payment of Debt	Code	Cell phone service				
PROVIDER Returned Contribution			_			
Lai Vullei						
TCC MAYOR Service 34.10 110.87 03/02/19	TCC	Maria		34.10	110.87	03/02/19
7 CC MAYOR SERVICE 34.10 1/0.87 03/02/19		THYOR			,,,,,,	
Code Payment of Debt	Code					
RETAILER Returned Contribution	ļ.,,	KETAILER			•	
WALMART Dotter Purpose: Paper for	WALMART					
MICHIGAN CITY MAYOR HANDOUTS 9,47 120,34 03/02/19	Michigan City	MAYOR		9,47	120,34	13/02/19
Corte	{ O L	PRINTING & ADDRES				n - 200 ·
		SILKSCEPPNING	= :	i		
Reprographic AZIS	Keprographic AZIS	d	☐ Other			
MICHIGAN CITY, IN MAYOR FOR CAHODIAN 120.00 240,34 03/07/19				124.00	2110 214	03/07/19
	MICHIGAN CAY, IN	MAYOR	7 (1	150.00	270,37	03/01/11
Code Payment of Debt	Code					
Variable III	Harris Parks	PRINTERS	_ '			
HAWKINS PRINTING JEINTERS JREINTERS JREINTERS JREINTERS JREINTERS Other Purpose: CAMPAIGN AND 18	HAWKINS IRINTING					
		MALLA		66.34	306.68	03/07/19
LAPORTE, IN MAYOR BUS, GLADS 6624 306.68 05/01/11	LATORIE, EN	7111901	/			, , , , ,
Code (ALCO) LOCAL ACCESS Department of Debt	Code	LOCAL ACCESS	1			
100065 In Prote County Cable TV STATION Returned Contribution	Acade la Para Character	Cable TV STATION				
Access La Poate County Cable TV STATION Cher_ Burpose: Spanson Show	ACCESS LA PARTE COUNTY					
Sponson show	3016,0 31.		Sponsor show	ا . سبع	יי ווייכיי	02/00/10
MICHIGAN CITY, IN MAYOR OF ST. PATS PREADE 75.00 381.68 03/08/19	MICHIGAN CITY, IN	MAYOR			281.68	דון מיוכט
SUBTOTAL THIS PAGE OF SCHEDULE B \$381.68	7	SUBTOTAL THIS PAG		\$381.68		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)	TOTAL OF ALL PAC	GES OF SCHEDULE B ON THE Enter total on ITEM 17a of th	LAST PAGE ONLY le Summarv Sheet.)	\$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER
46-19-47
Page of//

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	YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)		
		Direct In-Kind			* 55 × 1		
Code		Payment of Debt					
•	PRINTERS	Returned Contribution					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Other			,		
Haraldus Pourine	Mnyor	Purpose: CAMPAGA	300,00	681,68	03/14/19		
HAWKINS PRINTING	' ' '	Flyers In-Kind		7 0 7 7 2 3			
Code	CAMPAIGN HANDOUT MANUFALTURER	Payment of Debt 4					
Mushan Augal and	MANUFACTURER	Returned Contribution					
Myshop Augel. COM		Other					
BALLSTON LAKE, NY	Mayno	Purpose: CAMPAION BAGS & HANDOUTS	681.80	1,363.48	03/18/19		
	Mayor	Direct In-Kind					
Code	·	Payment of Debt		,			
P 1 0	PRINTERS	Returned Contribution		,			
Beacher PRINTING		Other					
911 FRANKLIN ST.				ار مار در در	/		
MichigAN City, IN	MAYOR	Purpose: CAMPAIGN BUS. CARds	.52,47	1,415.95	03/25/19		
μ ,		☐ Direct ☐ In-Kind					
Code		Payment of Debt					
LOUARIAN PROMOTIONS	SIGN MAKER	Returned Contribution					
]	Other					
2710 FRANKLIN ST.		Purpose: Signi letters		اسر مد سردسه و	ا وبل مالنده		
MICHIGAN CITY, IN	MAYOR Cell phone service	& HATE YOR SIGNS	100.00	1,515.95	04/01/17		
Code	Cell phone service	☐ Direct ☐ In-Kind		,			
		Payment of Debt					
	Provider	Returned Contribution			į		
·	1	Other					
TCC	MAYOR	1 010000.	34.10	1,550.05	04/02/19		
Code	7	Direct In-Kind					
	C. Al-una	Payment of Debt	i	<u> </u>			
GRANTIAM AIRBRUSH	SIGN MAKER	Returned Contribution		.]			
	7	Purpose: Update.		İ			
1122 W. 1000 N LA PORTE, IN	MAYOR	OLD AMPAIGNS	745 5/LOO	1,601.05	04/03/19		
		☑ Direct ☐ In-Kind					
Code	İ	Payment of Debt					
	Partens	Returned Contribution			į		
-	PRINTERS	☐ Other	i	ļ	}		
ļ		Purpose: Rubber			-		
HAWKINS PRINTING	MAYOR	STAMP & PRINTING	9 28.89	1,629.94	04/05/19		
TIMENTAL PRINTING	SUBTOTAL THIS PAG	E OF SCHEDULE B	\$1,248.26	,			
TOTAL OF ALL BA							
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)							



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER							
4	6-19	9-47					
Page_	3_	of _//					

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF EXPENDITURE		
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	YEAR-TO-DATE	(mm/dd/yy)		
		☑ Direct ☐ In-Kind			energy Her State of the		
Code		Payment of Debt					
WALMART	RETAILER	Returned Contribution					
LINCOLNWAY		Other					
LAPORTE, IN	MAYOR	PUTPOSE: CAMPAIGN MATERIAL	19.17	1649-11	04/04/19		
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Direct In-Kind					
Code		Payment of Debt 4					
Mexicals	Building Supply STORE	Returned Contribution			i		
5260 S. FRANKUN ST.	7	Utner		-			
1	Milan	Purpose: CAMPAIGN	31.85	1,680.96	04/08/19		
MICHIGAN CITY, IN	MAYOR	SIGN POSTS	0.100	,			
Code	Cable	☑ Direct ☐ In-Kind					
	ACCESS TV STATION	Returned Contribution		,			
		Other					
1100		Purpose: Sponsor	75.00	1,755.96	04/16/19		
ALCO	Mayor	Lg. WOMEN VOTERS	13,00	1,133,10	07/10///		
Code	Cell phone Service	☐ Direct ☐ In-Kind					
	Provider	Payment of Debt Returned Contribution					
	,,	Other					
		Purpose: Cell phone	117 90		21-10		
TCC	MAYOR	service upgrade	43,80	1,799.76	05/02/14		
. Code	Cable	☑ Direct ☐ in Kind					
· Cade	Access TV STATION	Payment of Debt	;				
	ACCESS TV STATION	Returned Contribution Other					
•		Purpose: グタロムゴロバ					
ALCO	MAYOR	HEHORIAL DAY PARA	le 75.00	1,874.76	05/24/14		
	,	Direct In-Kind	"	•			
Code	. D. d. C	Payment of Debt					
WIMS RADIO STATES	N KARIOSTATION	Returned Contribution					
685E.1675N		Purpose:		İ			
Michigan City, IN	Mayor	Purpose: CAMPAIGN COMMERCIALS	62.50	1,937.26	06/13/19		
17	a. handa			: ''			
Code	CAMPAIGN HANDOUT MANUFACTURER	Payment of Debt					
	MANUFACTURER	Returned Contribution					
Myshopangel		Uner					
Ballston Lake, NY		Purpose: CAMPAIGN	ا م مرمون	2 2 0 7 7/	Milialia		
, ,	MAYOR	BAGS & MAGNES	950.00	2,887.26	וופווטט		
	SUBTOTAL THIS PAG		\$1,257.32				
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$				
(Enter total on ITEM 17a of the Summary Sheet.)							



State Indiana

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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

FILE NUMBER	
46-19-47	
Page <u>4</u> of <u>11</u>	_

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	YEAR-TO-DATE	(nim/dd/yy)
Code		☑ Direct ☐ In Kind			
	PRINTERS	Returned Contribution			
		Other			
HAWKINS PRINTING	Marion	Purpose: PRILITECY PAMPAIGH Flyers	321.00	3,208.26	07/02/19
77.55.73.72.12.73	MAYOR	Direct In-Kind			
Codel	Cell phone	Payment of Debt			
	SERVICE PEOVIDER	Returned Contribution			
		Purpose: Cell phose			
Tec	MAYOR	Bervice	43,80	3252.06	07/02/19
		Direct In Kind			
Code	Cellphone	Payment of Debt			
·	Service Provider	Returned Contribution			
		Purpose: Cell phave			1.1.
TCC	MAYOR	Service	43.80	3,295,86	06/02/19
	· /	Oirect In-Kind			-
Code	LOCAL FM RADIO	Payment of Debt			
WE FM RADIO	STATION	Returned Contribution Other			
1903 Speingland AVE.		Purpose: Radio			north also
Michigan Cray, IN	MAYOR	COMMERCIALS	350.00	3,645.86	4.1/09/19
Code	CAMPAIGN HANDOUT	Direct In-Kind			ing week in
	MANU FACTURER	☐ Payment of Debt ☐ Returned Contribution			
Myshopangel	/ IANU / CIONER	Other			
		Purpose: CAMPAIGH	4	2010 20	مارمارم
Ballston LAICE, NY	MAYOR	HANDOURS	316,06	3,962.22	0//04/14
Code		☑ Direct ☐ In-Kind			
	PRINTERS	Payment of Debt Returned Contribution		•	٠.
•	1 101 10 11 10 10	Other			
BEACHER PRINTING	MAYOR	Purpose: CAMPAIGE	217.81	4,180.03	07/15/19
		Direct In-Kind			,
Code		Payment of Debt		}	
	Cable Acress TV	Returned Contribution Other			
		Purpose: אים בעם פא			
ALCO	Mayor	PATRIONG DAY PARAde	75,00	4,255.03	07/19/19
	SUBTOTAL THIS PAG		\$ 1367.77		
TOTAL OF ALL PA	\$				

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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER	
46-19-47	
Page	

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	YEAR-TO-DAYE	EXPENDITURE (mm/dd/yy)
		☑ Direct ☐ In-Kind			en to
Code	Cell phone	Payment of Debt			
	service provider	Returned Contribution Other			
TCC	Mayor	Purpose: Cell phowe Service	43.80	4298.83	68/02/19
Code		☑ Direct ☐ In-Kind			
	PRINTERS	Payment of Debt			
		☐ Other			
HAWKINS PRINTING	Mayor	Purpose: CAMPAIGN HANDOUTS	360.00	4658.83	08/20/19
Code		Direct In-Kind			
	SIGN MAKERS	☐ Payment of Debt☐ Returned Contribution			
	6	Other			
ReprographIC ARTS	MAYOR	Purpose CAMPAIGN SIGNSU	370.50	5,029.33	08/30/19
Code		Direct In-Kind			
*** <u>*****</u>	RESTAURANT	☐ Payment of Debt ☐ Returned Contribution			
STATION 801	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Other			
801 FRANKLIN ST. MICHIGAN CITY, IN	Mayor	Purpose: CAMPAIGN COMMITTEE HTTY	46.09	5,075.42	08/19/19
Code		☑ Direct ☐ In-Kind			
	Office Supplies	Payment of Debt Returned Contribution			
OFFICE MAX		Other			
FRANKLIN ST. MICHIGAN CITY, IN	MAYOR	Purpose: CAMPAIGN Supplies	19.25	5,094.67	08/23/19
Code	,	Direct In-Kind			
1	Building Supplies	Payment of Debt Returned Contribution	:		
İ	7 11	Other			
Menards	MAYOR	Purpose: Campaign SIGN posts	117.23	5,211,90	08/26/19
Code	Cell phone	Direct In-Kind Payment of Debt			
	Service Provider	Returned Contribution		· ·	
		Other			
TCC	Marias	Purpose: Cell phone	43.80	5255.70	09/02/19
, 00	MAYOR SUBTOTAL THIS PAG	Service E OF SCHEDULE B		01 ودريمور	- 11 1. 4
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE		\$1,000.67		
IOIAL OI ALL IA	\$				



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE NUMBER	
4	16-19-47	
Page_	6 of 11	

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	YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
Code		☑ Direct ☐ In-Kind			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	PRINTERS	Payment of Debt Returned Contribution			
	7,01101020	Other		ļ	
HAWKINS PRINTING	Mayor	Purpose: PRINTED BUS. CARds	68.21	5,323,91	09/09/19
Code		Direct In-Kind			:
WALMART	RETAIL	Payment of Debt A			
LINCOLNWAY		Other			
LA PORTE, IN	MAYOR	Purpose: CAMPAIGE Supplies	20.17	5344.08	09/03/19
Code		Direct In-Kind			
	Social Media	Payment of Debt Returned Contribution			
		Other			
FACEBOOK	MAYOR	Purpose: THTERNET	7.11	5,351.19	09/03/19
	7 17072	CAMPAIQU Direct In-Kind		0,00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Code	Romand	Payment of Debt			
WALMART	RETAIL	Returned Contribution Other			
LINCOLNWAY		Purpose: CAMPAIGN	22.76	537295	ng/ng/19
LA PORTE, IN	MAYOR	SupplieS ☐ Direct ☐ Ir-Kind		5,373.95	04901111
Code		Payment of Debt		,	·
Lowes	Building Supplie	Returned Contribution Other			
FRANKLIN ST.			·		10/-10
MICHIGAN CITY, IN	MAYOR	Purpose: Sigu MATERIALS	57.52	5,431.47	09 112/19
Code		☐ Payment of Debt			
	Building Supplies	Returned Contribution			
	9	Purpose: SIGN			, ,
Menards.	Mayor	MATERIALS	37,30	5,468.77	09/13/19
Code	,	Direct In-Kind			
	Sign Madens	Payment of Debt Returned Contribution			
	SIGN MAKERS	Other		ļ	
	1.1.	Signs Signs	ا د د د د د د د د د د د د د د د د د د د	ا بدید بر بر بر بر	69/16/19
Keprographic ARTS	MAYOR	SIGNS	450.00	5,918.77	ווטוןדט
TOTAL OF ALL DA	SUBTOTAL THIS PAG GES OF SCHEDULE B ON THE		\$ 663,07		
IOTAL OF ALL PA	(Enter total on ITEM 17a of th		\$		- , , ,
	,			• • • • • • • • • • • • • • • • • • • •	do
			1	•	



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER	
46-19-47	
Page 7 of //	

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)
		☑ Direct ☐ In-Kind			** ** * * * *
Code	San Illadia	Payment of Debt]
	SOCIAL MedIA	Other			
FACEBOOK	MAYOR	Purpose: INTERNET CAMPAIAN	3.00	5,923,77	09/23/19
Code	,	Direct In-Kind			
1111111111	Retail	Returned Contribution			
WALMART LINCOLNUMY		Other			, .
LAPORTE, IN	MAYOR	Purpose: CAMPAIQN Suppliés	46.21	5,969.98	09/25/19
Code		Ubirect In-Kind		-	
	PRINTERS	Payment of Debt Returned Contribution			
	,	DotherPurpose: Business			
HAWKINS PRINTING	MAYOR	CARds	41.94	6,011,92	09/26/19
Code		☐ Direct ☐ In-Kind			
	SIGN MAKERS	☐ Payment of Debt☐ Returned Contribution			
	9	Other			
ReprographIC ARTS	MAYOR	Purpose: CAMPAIGN SIGNS	240.00	6251.92	09/27/19
. Code	,	Direct In-Kind		:	
U.S. Post Office	POSTAL SERVICE	Returned Contribution			
LINCOLNWAY		OtherPurpose: Postage			
LA PORTE, IN	MAYOR	STAUPS	33.00	6,284.92	09/27/19
Code	•	Direct In-Kind			
Variable Coffice Com	OFFICE Supplies	☐ Payment of Debt ☐ Returned Contribution			
Kemps Office City Lincolnway	, ,	Other			
LAPORTE, IN	MAYOR	Envelopes	7.16	6,292.08	09/30/19
Code	•	Direct In-Kind			
WIMS RADIO	RADIO STATION	☐ Payment of Debt . ☐ Returned Contribution			
685 E. 1675 N		Other	ļ		
Michigan City, IN	Maria	RADIO	1050 00	7,351.08	10/10/19
1	MAYOR SUBTOTAL THIS PAG		1,059.00	1,501,00	, , , , , , ,
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE		\$ 1432. 3 1		
, +	\$				



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

(CFA-4 SCHEDULE B)-ITEMIZED EXPENDITURES

FILE NUMBER
46-19-47
Page <u>8</u> of <u>//</u>

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)
WEFM RADIO Springland Ave.	RADIO STATION	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: RADIO COMMERCIALS	400.00	7,751.08	10/06/19
Michigan City, IN	Cell phone	☑-Direct ☐ In Kind			
	Service Providec	Payment of Debt 2 Payment of D			
TCC	MAYOR	Service	43.80	7,7.94.88	10/02/19
AQUARIAND PROMOTIONS	Sign Maker Mayor	Provincet In-Kind Payment of Debt Returned Contribution Other Purpose: Lettering \$ 519 NS	150.00	7,944.88	10/09/19
Code	Printers	Payment of Debt Returned Contribution Other			
HAWKINS PRINTING	MAYOR	Purpose: PRINT Letters	146.25	8,091.13	10/30/19
WIMS RADIO	Radio Station Mayor	Poirect In-Kind Payment of Debt Returned Contribution Other Purpose: Political Commercials	&7.5 0	8,178.63	10/31/19
Code	Social Media	Direct In-Kind Payment of Debt Returned Contribution Other			
Facebook	MAYOR	PUTPOSE: INTERNET CAMPAIGN	25.00	8,203.63	10/56/19
U.S. Post Office LINCOLNWAY	Postal Service	Poirect In-Kind Payment of Debt Returned Contribution Other Purpose:			
LA PORTE, IN	MAYOR	POSTAGE STAMPS	44.00	8247.63	10/06/19
	SUBTOTAL THIS PAG		\$ 896.55		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of th	LAST PAGE ONLY le Summary Sheet.)	\$		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE	NUMBER	
4	6-19	7-47	
Page _	9	of	

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	YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
		☐ Direct ☐ In-Kind	,.		* **
Code		Payment of Debt			
Kemps Office City	OFFICE Supplies	Returned Contribution Other		·	
the Property		Purpose: CAMPAIGN	ر، بید	016479	1/2
LA PORTE, IN	MAYOR	Supplies	7.16	8,254.79	10/11/19
Code	•	Direct In-Kind			
	SOCIAL Media	Returned Contribution			
		Other		.,	
FACEBOOK	Mulas	Purpose: INTERNET	4.65	8,259.44	10/21/19
T RCE BOOK	MAYOR	Chrippigw Direct In-Kind	//		, , , ,
Code	·	Payment of Debt			
	PRINTERS	Returned Contribution			
		Other			
HAWKINS PRINTING	MAYOR	Purpose: CAMPAIGED HANDOUTS	107.00	8,366,44	10/24/19
Code		Direct In-Kind			
Code	SOCIAL MEDIA	Payment of Debt Returned Contribution			
	DOCIAL LEGIN	Other			
<i>Y</i> 6	11.100	Purpose: INTERNET	ا د. سرم	asal illi	مامطين
FACEBOOK	Mayor	CAMPAIGN	25,00	8,391.44	10128114
. Code	,	Direct In-Kind		,	
	SOCIAL MEDIA	Returned Contribution			
		Other			
FACEBOOK	MAYOR	Purpose: INTERNET CAMPAIGN	25.00	8,416.44	10/28/19
		Direct In-Kind			
Code1	Local Hodge	Payment of Debt			
	SOCIAL MEDIA	☐ Returned Contribution ☐ Other			
	. ,	Purpose: INTERNET	35.00		, , ,
FACEDOOK	Mayor	CAMPAIGN	35.00	8,451.44	10/28/19
Code	,	☐ Direct ☐ in-Kind			
	Building	Payment of Debt . Returned Contribution			
-	Supplies	☐ Other			
1		Purpose: Sign	ار		
Lowes	MAYOR	MATERIALS	30.25	8481.69	10/28/19
	SUBTOTAL THIS PAG	E OF SCHEDULE B	\$ 234,06		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$		
	(Enter total on ITEM 17a of th	ne summary Sneet.)			



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER	
46-19-47	_
Page 10 of //	

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	YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
Code		☑ Direct ☐ In-Kind			en gen en t
Code	Social Media	Payment of Debt Returned Contribution Other			
FACEBOOK	MAYOR	Purpose: INTERNET CAMPAIQN	50.00	8531.69	10/30/19
Code	Social Media	Direct In-Kind Payment of Debt 14 Payment of Debt 14 Payment of Ontribution Other Purpose: Turease			į
FACEBOOK	MAYOR	CHMPAIGN	75.00	8,606.69	10/31/19
Code	Cell phone Service Provider	☐ Other			10 10 10 10 10 10 10 10 10 10 10 10 10 1
TCC	Mayor	Purpose: Cell phone Service	43.80	8,650.49	11/02/19
Code	RADIO STATION	Direct In-Kind Payment of Debt Returned Contribution			
WIMS RADIO MICHIGAN CITY	MAYOR	Other Purpose: RADIO COMMERCIALS	700.00	8,850.49	1404/19
WIMS RADIO	RADIO STATION	Direct In-Kind Payment of Debt Returned Contribution Other		,	
Michigan City	Mayor	Purpose: Live Radio Commercial	87.50	<i>8</i> ,937,99	11/05/19
WEFM RADIO	RADIO STATION	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other			
Michigan City	MAYOR	Purpose: Political COMMERCIALS	190.00	9,127.99	11/13/19
Code	Social Media	Direct in-Kind Payment of Debt Returned Contribution Other			
FACEBOOK	MAYOR	Purpose: INTERNET CAMPAGN	75.00	9,202.99	11/01/19
TOTAL OF ALL PA	SUBTOTAL THIS PAG GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the	LAST PAGE ONLY	\$ 721.30 \$		
	Enc idea on them it d di a	ic Community Sheet.)	ī		



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER
46-19-47
Page // of //

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code	. Social Media Mayor	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Tweever		9,327.49	מלמלו
FACEBOOK CODE	MAYOR Social Media	CAMPAIAN ☐ Direct ☐ In-Kind ☐ Payment of Debt A' ☐ Returned Contribution ☐ Other	125.00	4,321.47	71704711
FACEBOOK	MAYOR	Purpose: Internet Campaign Poirect In-Kino	175.00	9,502.99	11/05/A
Facebook	SOCIAL MEDIA MAYOR	Payment of Debt Returned Contribution Other Purpose: Turnes Lery	110.48	9,613.47	11/21/19
Code	·	☐ Direct ☐ In-kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	770.70	,	, die
· 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	SE OF SCHEDULE B	\$ 410.48		
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 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

46-19-47

Page 1 of 11

DA 10 16.					
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
DUNNE A. PARRY	CITIZEUS FOR				
2206 Haple ST.	DUANE PARRY	150.00			
2206 Haple ST. MUCHIGAN CITY IN LENDERS OCCUPATION: 46560					
LENDER'S OCCUPATION: 46860		LOAN	03/14/19	150.00	150.00
	CITIZENS FOR	250.00			
	Drane PARRY.				
DUANE A. PARRY		LOAN	03/28/19	400.00	400.00
	CITIZEUS FOR	100.00			
D A Progra	DUANE PARRY				
DUANE A. PARRY LENDER'S OCCUPATION	,	LOAN	03/28/19	500.00	500.00
dig to					
- 15 7 7 1 - 17 1	CITIZENS FOR	1,000.00			,
DUANE A. PARRY	DUANC PARRY	LOAN	05/29/19	1,500,00	1,500.00
		,			
•	CITIZENS FOR	400.00			
Design 1 Proces	-				
DUANE L. PARRY	DUANE PARRY	LOAN	06/21/19	1,900.00	1,900.00
	CITIZENS FOR	800.00] .		
					:
DUANE A. PARRY LENDERS OCCUPATION:	DUADE PARRY	LOAN	07/26/19	2,700.00	2700.00
	CITIZENS FOR	750.00			
The A Proof	DUNNE PARRY				
DUANE A. PARRY LENDERS OCCUPATION	COALC THONY	LOAN	10/3/19	3450.00	3,450,00
		SUBTOTA		OF SCHEDULE D	\$3,450,00
	TOTAL OF ALI	L PAGES OF SCHEDU	LE D ON THE LA	ST PAGE ONLY	\$3,450.00
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.)					

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

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Yes No

OF

(CFA-4)
Summary Sheet

FILE NUMBER

46-19-47

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT? Yes No	ļ	• .	
COMMITTEE INFORMATION	` <u> </u>		
Full Name of Committee (as on Statement of Organization) Check if this is a new	name.		
1. Full Name of Committee (as on Statement of Organization)		_	
2. Acronym or Abbreviated Name (if any)	3. Committee Tele	ephone Number	
2. Acronym of Appreviated Name (ii any)	(219)87	73-6302	
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check if this is a new	address.	
5 City State 71P Code	6. Party Affiliation	(if applicable)	
2206 Maple ST. 5. City, State, ZIP Code MICHIGAN CITY, IN 46360	Republic	cau _	
CANDIDATE INFORMATION (For Candidate's C	Committees Only)		
7. Full Name of Candidate (Include any nickname.)	8. Party Affiliation	or If Independent	Candidate
Desaire ADTHER PAREN	Republ 10. County of Res	ICAN	
DUANE ARTHUR PARRY 9. Office Sought (Include district number, if any! Not required for exploratory committee.)			
MANINA AS MULLICAN CITY	LAPORTO	<u></u>	
TYPE OF REPORT			CANDIDATES ONLY
11. Check one.		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conve	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend St	atement of Organization.)	☐ Post-Conv	ention
12. Reporting Period (mm/dd/yy):		DLUMN A	COLUMN B Year to Date
From: //22/19 . Through: /2/31/19		is Period	Teal to Date
13. Cash on hand and investments at the beginning of this reporting period.	1.9	96.75	
14. Cash on hand and investments January 1, current year.		A. Charles M.	614.44
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			10,995.78
15a. Itemized (Use Schedüle A.)		<i>Φ</i>	10,113,13
15b. Unitemized	BTOTAL	<u>4</u>	1199578
15c. Add lines to and 15b in both Columns.		996.75	11,610.22
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL /	140.13	77,010.22
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)		996.75	11,610,22
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		,1 10,13	m of
17b. Unitemized	BTOTAL /	996.75	11.610-22
17c. Add lines 17a and 17b in both coldinas.	TOTAL	190.13	11,01000
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	<i>D</i>	
19. Debts OWED BY the committee (Use Schedule D.)		1453.25	
20. Debts OWED TO the committee (Use Schedule E.)		P I	RKS OFFICE
CERTIFICATION			OR OFFICE USE ON Y
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	TRUE, CORRECT AND	COMPLETE.	0.000
Signature of Treasurer Title	Date (mm/	aayyy MhA	2 202 0
Dural a. Parry TREASURER	Date (mn/	2/2020	
Signature of Candidate (if applicable)	11/02	12020 M	puztehistock
WARNING: Any information contained in this report hay not be copied for sale or used for any commercial purpose	e. (IC 3-9-4-5) A persor	WHO CHERK OF LA F	CRTE CIRCUIT COURT
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-	rate report as required t	By lite injulatia j	
Campaign Finance Law commits a Class of miscellifeahor, (IC 3-14-1-14) and may be subject to this pertaines. (IC 3-	0 . 70, 10 0 0 4 77, 10 0	<u>- : : : : : : /</u>	

State Indiana

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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

	FILE NUMBER	
4	46-19-47	
Page	//of//	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
Code	SOCIAL MEDIA Ads	Direct In-Kind Payment of Debt Returned Contribution Other			
FACE BOOK	MAYOR	Purpose: INTERNET	125.00	9327,59	11/04/19
Code	SOCIAL Media Ads	Direct In-Kind Payment of Debt Returned Contribution	•		
FACE BOOK	MAYOR	Other_ Purpose: INTERNET CAMPAIGN	175.00	9,502,99	11/05/19
Code	SOCIAL Media Ads	☐ Payment of Debt ☐ Returned Contribution			
FACEBOOK	MAYOR	OtherPurpose: INTERNET CAMPAIAN	110.48	9613.47	11/21/19
Code	CANdidATE FOR HAYO	Direct In-Kind			
DUANE A. PARRY 2206 Maple ST. Michigan Cry, IN	Mayor	Purpose: Repayment OF LOAD TO COMM	1996.75	11,610,22	12/31/19
Code	60	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other)
		Purpose:			
Code	, il.	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	:		
	karana kanana ka	OtherPurpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution			
		Other			
			0.24	, ,	
TOTAL OF ALL PA	SUBTOTAL THIS PAC AGES OF SCHEDULE B ON TH	E LAST PAGE ONLY	\$2,407,23		
TOTAL OF ALEFT	(Enter total on ITEM 17a of t	he Summary Sheet.)	\$11,610,22		