

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

IS THIS AN AMENDMENT? Yes No

(CFA-4) Summary Sheet

FILE NUMBER

COURTESU FILING

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization) Check if this is a new	name.	•	
2. Acronym or Abbreviated Name (if any)	3. Committee	ee Telephone Number	
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check if this is	a new address.	
5. City, State, ZIP Code Michigan City IN 46360	6. Party Affi	liation (if applicable)	
CANDIDATE INFORMATION (For Candidate's 0	Committees	Only)	
7. Full Name of Candidate (Include any nickname.)	8. Party Affi	liation or If Independe へってくみもし	ent Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County	of Residence	
TYPE OF REPORT		CONVENTIO	ON CANDIDATES ONLY
11. Check one:		. Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Con	rvention
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend Str	atement of Organizat	ion.) Post-Co	nvention
12. Reporting Period (mm/dd/yy):		COLUMN A This Period	COLUMN B
From: Sept 31,21 Through: Dec 31,21			Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		Ø	128
14. Cash on hand and investments January 1, current year.			Ø
CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
		10 37	10 222
15a. Itemized (Use Schedule A.)  15b. Unitemized		1300	100, 300.
	TOTAL	19370	100 82
	TOTAL	18320	16 220
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.  EXPENDITURES	TOTAL	100	13 W
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		1528.75	1528.75
		73 20 . 73	75 20: 13
17b. Unitemized  17c. Add lines 17a and 17b in both columns.	BTOTAL	1528.75	152825
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL 6	<del></del>	166, 791.25
	IOIAL (B)	111.6	10631 (11.0)
19. Debts OWED BY the committee (Use Schedule D.)		$\widetilde{\mathscr{D}}$	- ,
20. Debts OWED TO the committee (Use Schedule E.)			
CERTIFICATION		<u> </u>	FOR AFFICE USE ONLY E
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS			IN CLERKS OFFICE
Signature of Treasurer Title Treasurer	Date	(mm(dd/yy)	
Signature of Candidate (napplic tole)		(mm/dd/yy) 11 / 2 / 2	JAN 1 3 2022
WARNING: Anyimpormation 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 accult	e. (IC 3-9-4-5) 🖡 p rate report as rec	erson who knowingly	1/10-54
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 3-9-4-1	7, IC 3-9-4-18)	CLERK OF LA PORTE CIRCUIT



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

FILE NUMBER			
Page	of		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	ON OTHER REGELT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1 Eugenesimmons	Contributions:	70000		10/12/2021
nog toly rue Ave	In-Kind (describe)	200	(00°	19112/102/
Notichican City JD			,	_
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Other Receipts:  Interest Loan			ANP
	Miscellaneous (specify)			•
Contributor's Occupation (if required)				<u> </u>
2 Sheridan Sands Truestmont	Contributions: Direct	25000		10/9/21
1926 W Hawterseyut	In-Kind (describe)	CSC	500	,
	Other Receipts:		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Indianapolis In	Interest Loan			1 10 1
, 46262	Miscellaneous (specify)			A.N.D.
Contributor's Occupation (if required)	Contributions			
Paul Reilly	Contributions: Direct	2500"	5≥0000	.11
Mary Pat Reilly 502 Colfax	In-Kind (describe)			10/7/21
302 Coltax	Other Receipts:			_
Bevoly Shares 46360	☐ Interest ☐ Loan☐ Miscellaneous (specify)			A.N.D
	iviiscellatieuus (specify)			
Contributor's Occupation (if required)	Contributions:			11.01.1
That Bloch yar High land Ar Chesterson IN	Direct In-Kind (describe)	500°°	50000	10/29/21
Chesenson In				
46304	Other Receipts:			
	☐ Interest ☐ Loan ☐ Miscellaneous (specify)		,	A, N, D.
Contributor's Occupation (if required)				
5. Timothy Anderson	Contributions:	100000	100h	idakla 1
Susan Anderson	In-Kind (describe)	1000	1000	192921
2961 Lake Shore Dr				
lone Beach IN	Other Receipts:  Interest Loan			
46360	Miscellaneous (specify)			A.N. W
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$ 4750°°		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

FILE NUMBER				
,				
Page	of			

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
1 segsy Thamas	Direct	411 f. 4		12/22/21
Kriston Thomas	In-Kind (describe)	0"	2 00	1 -1 -1
5932 Quercus Cove of	Other Receipts:	300	500	
Charlottenc	Interest Loan			
28217	Miscellaneous (specify)			4. D.D.
Contributor's Occupation (if required)	Contributions:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,
-	Direct	10000	1050	
712 723 541	In-Kind (describe)			14101
110+1) -	Other Receipts:			
	Interest Loan	-\/	1-tn-	4
	Miscellaneous (specify)		Y-41/ =	10.12
Contributor's Occupation (if required)	Contributions:			
Hashom Khalil	Direct	1000000	(000	
601 Franklinst	In-Kind (describe)	. "	, (000	
Michigan City IN	Other Receipts:			
46360	☐ Interest ☐ Loan ☐ Miscellaneous (specify)	a fixtur		
Contributor's Occupation (if required)				A.N.D.
4.	Contributions:			
Ida Watson	Direct In-Kind (describe)	1000000.	Ima	
51768 Summer Woodct			1000	
Granger IN 46530	Other Receipts:	1		
· ·	Miscellaneous (specify)			A.N.D.
Contributor's Occupation (if required)				11.140
" Sean + itzpatrick	Contributions:	2600	00	
Juny 1 1 2 provide	In-Kind (describe)	250	25000	11/22/21
				1,119
	Other Receipts: Interest Loan			
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
i	THIS PAGE OF SCHEDULE A	\$ <b>3</b> 550 **		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet.)	\$		

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

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

FILE NUMBER			
Page	of		

gela Deutch

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
Brews y Lodge 5727 N 600 W	Contributions:  Direct  In-Kind (pescribe)	102000	1020	11/4/21
Michigan City To 46360  Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	de de la caracter constant of the second of	de processor de respectante de serviciones de la constante de	AIH. D.
2 Angela Nelson Devitch 127 Lady Lane	Contributions: Direct In-Kind (describe)	500	- 200°2	10/6/21
Michagan Cuty Juy 46360  Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			A.N.D
Meticulous Pesign 1828 N Illinois Indianapolis IN	Contributions: Direct In-Kind (describe)	( )	100060	11/4/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			A.N.D.
"Amber Ake G12 Holton Rd	Contributions: Direct In-Kind (describe)	(000°°	100000	114/21
LaParte Ju 46350  Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			A.N.D.
"Porald & Sue Baback 631 Elakefront Beverly Shores IN 46301	Contributions: Direct In-Kind (describe)	100000	10000	11/4/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)		,	A. N. D.
	THIS PAGE OF SCHEDULE A	\$ 452000		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM	A ON THE LAST PAGE ONLY 1 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

FILE NUMBER			
Page	of		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number. city, state, ZIP code)	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
CArol Ann Brown	Direct			11/4/21
131 Shorewood Dr	In-Kind (describe)	100000	1000	141121
Wichigan City IN	Other Receipts:	1000	(000	
'	Interest Loan			A.N.D.
96360	Miscellaneous (specify)			77.70.10.
Contributor's Occupation (if required)	Contributions:			"
Trac Development.	Direct	1 1200	,	
409 W. Koiffer K)		100000	1000	11/4/2/
Michigan City IN	Other Receipts:		1.00	'
1	☐ Interest ☐ Loan☐ Miscellaneous (specify)			A.N.D.
Contributor's Occupation (if required)				'   '   '   '   '   '     '     '     '     '
	Contributions:			
"Michael Brennan	Direct In-Kind (describe)	2•		10/21/21
153 Barefoot Circle		520	350°	101/01
BonHa Springs FL	Other Receipts:			,
34134	Miscellaneous (specify)	•		A.N.D.
Contributor's Occupation (if required)				, , , ,
Philip & the Latelford	Contributions:	700	60	1 1
1 '1 1 1 1	In-Kind (describe)	250	250	11/4/21
439 Bayd Circle				
Michigan City TN	Other Receipts:  Interest Loan			~
46360	Miscellaneous (specify)			A.N.D.
Contributor's Occupation (if required)				
Timothy & Patricia Enright 10329 S'Horne	Contributions:  Direct			i (
10379 Storne	In-Kind (describe)	المحمة	12200	11/12/
Chicago IL	Other Receipts:		100	11.10
60643	Interest Loan			110
	Miscellaneous (specify)			M. N. V.
Contributor's Occupation (if required)	THE DACE OF SCHEDULE A	£ 25/200	,	
TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY	\$ 35000		
	15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

FILE NUMBER			
Page		_ of	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1 Nicholas & Ashley Langslio 10353 South Soeley Chicago IL	Contributions: Direct In-Kind (describe)	1000000	(000)	10/50/21
Chicago SL 60643  Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			A. N.D.
Charles Hobson 7069 Deer Valley Dr South Haven MI	Contributions: Direct In-Kind (describe)	100	10, 20	11/2/21
Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)	1400	1000	A.V.D.
3.	Contributions:  Direct In-Kind (describe)		The section of the se	
Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			i.
4.	Contributions: Direct In-Kind (describe)			
Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			
5.	Contributions:  Direct In-Kind (describe)			·
	Other Receipts:  Interest Loan  Miscellaneous (specify)			
Contributor's Occupation (if required)SUBTOTAL `	THIS PAGE OF SCHEDULE A	\$ 2000°°		
TOTAL OF ALL PAGES OF SCHEDULE		\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

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

	FILE NUMBER	
Page	of	

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.		Contributions: Direct In-Kind (describe)		$\langle \rangle$	X
		Other Receipts:  Interest Loan  Miscellaneous (specify)			
2.		Contributions: Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Miscellaneous (specify)			
3.		Contributions:  Direct In-Kind (describe)		in and the second	
	in the first of the state of th	Other Receipts:  Interest Loan  Miscellaneous (specify)	na victoria		
4.		Contributions:  Direct In-Kind (describe)			
	·	Other Receipts:  Interest Loan  Miscellaneous (specify):			
5.		Contributions: Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Miscellaneous (specify)			
	SUBTOTAL	THIS PAGE OF SCHEDULE A	\$		
	TOTAL OF ALL PAGES OF SCHEDULE		\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

**Itemized Contributions and Other Receipts** 

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

FILE NUMBER				
Page	of			

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
	☐ Direct ☐ In-Kind (describe)	_/		
	Other Receipts:		10 X	
	☐ Interest ☐ Loan			
	Miscellaneous (specify)	and the second s		
2.	Contributions:		,	
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan  Miscellaneous (specify)			
3.	Contributions:			
J.	Direct In-Kind (describe)	,		
	Other Receipts:	۰۰۰ و		
	Miscellaneous (specify)			
4.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Interest Lan Loan Miscellaneous (specify)			
		,		
5.	Contributions:  Direct			
	In-Kind (describe)			
	Other Receipts:			
	Miscellaneous (specify)			
SUBTOTAL 1	HIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE / (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER	
Page _	of	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1 DPBC PAC	Contributions: Direct	_		1
11. 10 IT Cl 2-	In-Kind (describe)	(an)		10/25/21
1. DPBG PAC 9025 RiverRd St 200 Indiamapolis IN 46243				17/01/4
End Arma polis T.)	Other Receipts:	•		
111 14	☐ Interest ☐ Loan			A.N.D.
46013	Miscellaneous (specify)			ス・ス・ン、
		* * * * * * * * * * * * * * * * * * * *		
2.	Contributions:			
	Direct			
	n-Kind (describe)	, `		
	Other Presints:			
	Other Receipts:  Interest Loan			
	Miscellaneous (specify)			
3.	Contributions:			
<del></del>	Direct			
	n-Kind (describe)	, i		
	Other Receipts:			
	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			
				:
	Castilia diasa			
4.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)	,		
5.	Contributions:			
	☐ Direct☐ In-Kind (describe)			
	I III-IVIII (Appoints)			
	Other Receipts:			
	interest Loan			
	Miscellaneous (specify)			
SUBTOTAL .	THIS PAGE OF SCHEDULE A	\$ 1000000		
TOTAL OF ALL PAGES OF SCHEDULE		5-6		
(Enter total on ITEM	1 15a of the Summary Sheet.)	**		
		181250	3	

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committees). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
Page	of			

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number. city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy)  RECEIVED BY
1.		Contributions:  Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	The same of the sa		
2.		Contributions: Direct In-Kind (describe)	4		
		Other Receipts:  Interest Loan  Miscellaneous (specify)			
3.		Contributions:  Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Miscellaneous (specify)			
4.		Contributions: Direct In-Kind (describe)			
	,	Other Receipts:  Interest Loan  Miscellaneous (specify)	· .:		
5.		Contributions: Direct In-Kind (describe)			"
		Other Receipts:  Interest Loan  Miscellaneous (specify)			
	TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

### (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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

FILE NUMBER						
-						
Page	of					

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 Conday. Can		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	39.34	37.34	10/27/4
Code Act Blue.com Worden's Action Moderner POBOX 8654 MICHIGAN CITY TO 46360	7	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	210∞	250,00	1/2/21
Code ZornBreway GOT E ath St Michigan City D		Birect In-Kind Payment of Debt Returned Contribution Other Purpose:	993.30	qq3,30	11/2/21
Office Max 18 Denes Plaza Michigan City 20 46360		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	29.37 	29.37	11/8/21
60 Daddy com		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	19.36	68.71	11/9/21
Act Bluc. com	• · · · · · · · · · · · · · · · · · · ·	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	3.75	253.75	12/3/21
Code Co Daddy; con	,	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	12.05	80.76	12/6/21
	SUBTOTAL THIS PAGE	E OF SCHEDULE R	1317.11		
TOTAL OF ALL P	AGES OF SCHEDULE B ON TH		** <del>****</del>		
	(Enter total on ITEM 17a of t		\$		



(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

State Form 4606 (R15 / 5-19) Indiana 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				
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)
Reprographicads 2824 Michigan BIVD Michigan City D 46360		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	180°E	Roso	12/8/21
code Vantiv Economero	**	Direct In-Kind Payment of Debt In-Kind Returned Contribution Other Purpose:	1.6	1.61	12/9/21
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			,
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code	·	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG		\$ 181.61		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.) * り がつ					



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14) (CFA-4 SCHEDULE C)
ITEMIZED EXPENDITURES
For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

FILE NUMBER						
•						
Page		_of				

					<del>, -</del>	
				Page _	of	
		PUBLIC QUESTION	N INFORMATION			
	f Public Question. stion: Statewide  Supported Oppo	Local		F. Marijani i daniy vu v		
	IAME AND MAILING ADDRESS mber, city, state. ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code			Direct In-Kind Returned Contribution Other Purpose:			
Code		•	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code_			Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code			Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	*		
Code		,	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		·	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
		SUBTOTAL THIS PAG	SE OF SCHEDULE C	\$		
	TOTAL OF ALL PAG	GES OF SCHEDULE C ON THI (Enter total on ITEM 17a of to	E LAST PAGE ONLY	\$		



State Form 4606 (R15 / 5-19) 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. Are 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					
1					
Page	of				

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS (street, number, city, state. ZIP code)	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED (mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION		. , , , , , , , , , , , , , , , , , , ,	***		
LENDER'S OCCUPATION:			,		
LENDER'S OCCUPATION.	<i>†.</i> .		ing fig.		
LENDER'S OCCUPATION:			# ·		
LENDER'S OCCUPATION					
			-		
LENDER'S OCCUPATION				OF SCHEDULE D	\$
	TOTAL OF ALL	PAGES OF SCHEDUL. (Enter total on l	E D ON THE LA TEM 19 of the S	ST PAGE ONLY (ummary Sheet.)	\$



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

# (CFA4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, <u>regardless of the amount</u>, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

	FILE	NUMBER	
Page		of	

BORROWER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	CO-SIGNER'S NAME AND MAILING ADDRESS (if any) (street, number, city, state, ZiP code)	ORIGINAL AMOUNT	DATE DEBT · INCURRED (min/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
					0
				(	
			** **		
,					
	·				
	· ·,				
	TOTAL OF A	ALL PAGES OF SCHEDU	AL THIS PAGE OF LE E ON THE LAST TEM 20 of the Sun	PAGE ONLY	\$





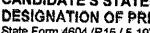
### CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

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 Y	'es, plea	se entei	the file n	umbe	r in thi	s box. —	•	46-22-73
SECTION A . CANDIDATE I	NFO	RMATION: F	ill in al	l applid	able box	es as	fully	and acc	urate	ly as possible.
2. Last Name		st Name		Middle N			Nicknam			3. Type of Committee (Check one)
Deuitch	Ar	igela		Nelson			An	gie		Candidate's Principal Committee     Exploratory Committee
4. Mailing Address (number and street, city, str	ate, and Z	IP code)		.1	5. FAX (Op	tional)		6. E-	mail A	ddress (Optional)
126 Lady Lane, Michigan City, IN 4	16360				, ,			an	gie@ar	igieformichigancity.com
7. City	State	ZIP Code	8. Co	unty	1( )	9. Tele	phone (i	Day)	Т	10. Telephone (Evening)
Michigan City	IN	46360	1	.aPorte		219	321-	0005		, ,
11. Party Affiliation				12.	Office Sough	it (Includ	de district	number, if a	ny. No	t required for an exploratory committee.)
🕍 emocratic 🗌 Libertarian 📙 Republi	ican 🔲	Other		_   ^	/layor of l	Michig	ıan Cit	y, Indiana	a	
SECTION B. COMMITTEE I	INFO	RMATION: I	Fill in al	l applio	able bo	es as	fully	and acc	urate	ely as possible.
13. Full Name of Committee (Do not abbr	reviate.)	Check if thi	s is a new n	ame.						
Angie for MC Committe										
14. Mailing Address (number and street, city, s	state, and	ZIP code) 🔀 Ch	eck if this is	a new ad	iress. 15. F.	AX (Opti	ional)	16. E	-mail	Address (Optional)
PO Box 8754, Michigan City, IN 46361	1				, , , , , , , , , , , , , , , , , , ,	1				
	State	ZIP Code	18. C	ounty		19. Te	lephone		20	). Committee Organization Date
Michigan City	1N	46361	La	Porte		( 219	, 229	9-2740	(n	nm/dd/yy) 9/29/2021
	nate Ca	indidate as Chairp	erson.	Check if	this is a new		rson.		L	
Eugene Simmons	, <b></b>	v.i.anp			/0 0 11011	po	·-·!!			
22. Mailing Address (number and street, city, s	etata and	7/D code) D Chr	ack if this is	a new adv	imes 22 E	AY (Onto	ionali	24 6	mail	Address (Optional)
1709 Johnrue	טומוס, מווט	Zir code) Li Cili	CCK II UIIS IS	a new au	1,633. ZJ. F	AN (Opu	Ullaij			ng805@gmail.com
	Ctata	ZIP Code	100.0	<u> </u>	(	)  27 To	Ib			
· · · · ·	State			ounty		1	lephone	,		28. Telephone (Evening)
Michigan City	iN	46360	LaP			( 219	)	-5537		( )
29. Bank or Other Depositories (List all b	anks or	other depositories	in which th	e committe	ee deposits fu	ınds, ho	lds accou	ınts, rents <b>s</b> e	ifety de	posit boxes or maintains funds.)
Horizon Bank										
30. Exploratory Committee (Give brief stater.	ment expl	aining purpose of an e	xploratory cor	nmittee only.						ommittee pay the candidate a salary or copy of the contract.) \(\sum \) Yes \(\sum \) No
					Tennburse	ment for	iosi way	earn rea, c	illacii a	copy of the conduct.) These Extro
SECTION C. APPOINTMEN					)					
32. I, as Chairperson of the		1					Sigi	natore of the	e Com	ittee Chairperson
committee, appoint the following Treasurer of the Committee.	perso	nas Mici	hael Gresha	ım			1	11111111	4 X	immeres
	te candi	date as treasurer.	Chec	ck if this is	a new treasu	rer.	بربو ا	701		Jimiano-
Michael Gresham								,		,
34. Mailing Address (number and street, city, s	state, and	ZIP code) ☐ Che	eck if this is	a new add	ress. 35. F	AX (Opti	ional)	36. E	-mail	Address (Optional)
2422 Ohio Street		, –			,	, '	·			
37. City	State	ZIP Code	38. C	ounty		39. Te	lephone	(Day)	- 1	40. Telephone (Evening)
Michigan City	IN	46360		Porte		, 21		8-3292	1	
,	- OF	ADDOINTAG			<i>E</i> \	](	) 00	O OLOL		()
SECTION D. ACCEPTANCE						hi- C:		of Dames	And	nth-614 anniatment
41. I give notice that I accept th Committee. I am not the chairpe							grature	Person	The CE	pting Appointment
permitted for a candidate committe					levoche		الر	m'	1	1
SECTION E. CERTIFICATION			NT							FOR OFFICE USE ONLY
We certify as the candidate and								it we hav	6	
examined this statement. To the be	st of o	ur knowledge a			, correct a	nd con		er lelel ( c. )	_	FILED
42. Typed or Printed Name of Chair	persor	n Signeture	or Chair	person		1	Date (mi	m/aa/yy)	را	IN CLERKS OFFICE
Eugene Simmons		della	WX	m	NING		1/3	1200	5	
43. Typed or Printed Name of Cand	idate	Signature	of Gandi	gate			Date (m)	m/qd/yy)	]	
Angela Nelson Deuitch		1-60	1/4 /	(da-	4		1/3	3/200	3	JAN 4 2023
Warning: State law requires that any ch	ange in	this information t	e reported	within ter	1 (10) davs	of the ch	' / -	- 1	A	
person who knowingly files a fraudulent re	eport co	mmits a Level 6 (	D felony (IC	3-14-1-1	3). A person	who fail	s to file a	a complete o	or .	
accurate report as required by the Indiana subject to civil penalties (IC 3-9-4-16, IC 3-			v commits a	a Class B	misdemeand	or (IC 3-	74-1-14),	and may b	е	Lyladry Strons
										CIESK OF IN PORTE CIRCUIT COURT





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

(CFA-1)

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 AMENDMEN	17? [] Y	'es 🗹 No #	Yes, pleasé enter t	the file numbe	er in this box.	. →
SECTION A CANDID/ 2. Last Name	TEINE	ORMATION	Fill in all applica	ble boxes a	s fully and a	accurately as possible.
,		First Name	Middle Nar	те	Nickname	3. Type of Committee (Check one
Deuitch		Angela	Nelsor	1	Angie	☐ Candidate's Principal Committe ☑ Exploratory Committee
4. Malting Address (number and street			ļē	. FAX (Optional)		6. E-mail Address (Optional)
126 Lady Lane, Michiga			(			nelsondeuitch@gmail.com
Michigan City	Stat	2JP Code	8. County		ephone (Day)	10. Telephone (Evening)
11. Party Affiliation	1114	_1	LaPorte		321-000	
☑ Democratic ☐ Libertarian ☐ f	Republican	Other				r, if any. Not required for an exploratory committee
SECTION B. COMMITT	EE INF	ORMATION:	Fill in all applica	ble boxés a	s fully and a	accurately as possible
The state of the s	N CONTICATOR	e.) [] Check if thi	ls is a new name.			country as possible.
Angle For MC Comm			· · · · · · · · · · · · · · · · · · ·			
4. mailing Address pander and size	ri, vily, biaic, e	wai ZiP wale) □ Gir Na 40000	ieck if iiris is e new ecicire	iss. 16. FAX (Opi	ionai)	ið. E-mail Address (Optional)
126 Lady Lane, Michiga	State		1.0	()	L	nelsondeuitch@gmail.com
Michigan City	IN		18. County LaPorte	1	lephone	20. Committée Organization Date (mm/dd/yr) 0/20/2024
					5616389	<sup>(minvouyy)</sup> 9/29/2021
Eugene Simmons	Designate	Canuldate as Chairp	berson. (V) Check if this	s is a new champe	raon,	
2. Mailing Address (number and stree	t city state a	and 7IP code) L I Chi	ack if this ke a nasu address	-n 122 Eav 20-4		
1709 Johnrue	e*		N. Philipper of Manager, companies	58. 28. PAX (Up)	4	24. E-mail Address (Optional) Simmong805@gmail.com
5. City	Siele	ZiP Cude	26. Sounty	()  27. Tu	iepinome (Day)	28. Tuluphune (Evering)
Michigan City	IN	46360	Laporte	1	8985537	
8. Bank or Other Depositories (Lis	t ell banks i	or other depositories	in which the committee (			is safety deposit boxes or meintains funds.)
Horizon Bank		•				
0. Exploratory Committee (Clsa bile				31. Salaries and f	สมายเกษายน เลยเกษาเกษา	i (VVIII the committee pay the cardidate a salary o
To receive and expend funds t				eamoursement for	rusi wages/ ir Ye	s, attach a copy of the contract.) Yes 🗹 N
ECTION C. APPOINT	VIENT O	REASURE	R (IC 3-9-1-14)			the control of the co
<ol><li>I, as Chairperson of ommittee, appoint the follow</li></ol>	not enu eseu oniv	ean sel			Signature of	f the Committee Chairperson
reasurer of the Committee.		iviicna	iei Gresham		July	the Simmura
3. Tressurer's Full Name 📋 De Michael Gresham	signate can	didate es treasurer.	Check if this is a ne	ew treasurer.		
4. Malling Address (number and street	Alfr clain a	nd 7/B code) 1 Cha	and If this is a many address.	- Ing pay (a.m.		
2422 Ohio Street	, wy, state, as	azradej Ljelie	wan one is a new addres	s. 35. FAX (Upti	· · · · · · · · · · · · · · · · · · ·	15. E-mail Address (Optional)
7. City	State	ZIP Code	38. County	1( )   139, Tel	aphone (Day)	southsider2k4@gmail.com
Michigan City	IN	46360	Laporte	1	8983292	To templiona (L. Tolling)
			NT (IC 3-9-1-15)		JOGGOROLI	
i. I give notice that I accep	NCE OF					
	ນໄປ ເປັນ	เป็นธ สเหมี เยชมมา	เมชนษาไ ใด ซอไม่ได้เมียก	rer of ដានៃ គឺរំដូ	nigenta or Kon	and weceshild who mandar
	ui üle du airperson	ilies and respon	เมชนษาไ ใด ซอไม่ได้เมียก	rer of this Sig (except as	1 LD.	acti Acceptus Appointment
ermitted for a candidate comm	ut Gie du sirperson nittee und	ilies and respon of a campaign der IC 3-9-1-7).	nsibilities of Tressu- finance committee	rer of this Sig (except as	Turk.	) / John
ermitted for a candidate comme ECTION E. CERTIFIC/ e certify as the candidate	of the dustreers on mittee und ATION Cand the	tiles and responder ic 3-9-1-7). DE STATEMEN duly appointed	isibilities of Tressur finance committee VI Chairperson of the	Committee a	nd that we h	FOR OFFICE USE ONLY
ermitted for a candidate comme ECTION E. CERTIFIC/ e certify as the candidate termined this statement. To the	ot the dualifiers on mittee und the and the abest of	riles and respon of a campaign der IC 3-9-1-7). OF STATEMEN duly appointed our knowledge a	isibilities of Tressur finance committee NT Chairporson of the and ballof it is tyle, or	Committee a	nd that we h	FOR OFFICE USE ONLY
ermitted for a candidate committed for a candidate CERTIFIC/ for certify as the candidate candidate candidate this statement. To the candidate of CERTIFICAL Name OF CERTIFICATION OF CERTIFICATION OF CERTIFICATION OF CERTIFICATION OF CERTIFIC	ot the dualifiers on mittee und the and the abest of	niles and responds a campaign der iC 3-9-1-7). DF STATEMEN duly appointed our knowledge a campaign and Signature	finance committee  Chairperson of the industrial tables to be a conference of Chairperson	Committee a	nd that we hiplete. Date (mm/dd/y/)	FOR OFFICE USE ONLY  IN CLERKS OFFICE
ermitted for a candidate comp ECTION E. CERTIFIC/ To certify as the candidate examined this statement. To the 2. Typed or Printed Name of C Eugene Simmons	ot the dualiperson mittee und ATION Cand the best of chalrperson	nibs and responds a campaign der iC 3-9-1-7). DF STATEMEN duly appointed our knowledge a campaign Signature	finance committee  VI  Chairperson of the and belief it a true, co of Chairperson	Committee a	nd that we had the plots. Date (mm/dd/y) 9/29/202	FOR OFFICE USE ONLY  IN CLERKS OFFICE  1
to certify as the candidate kamined this statement. To the 2. Typed or Printed Name of C Eugene Simmons 3. Typed or Printed Name of C	of the dualiferson mittee und ATION ( and the e best of halrperson and that are the conditions are the condi	nibs and responds a campaign der iC 3-9-1-7). DF STATEMEN duly appointed our knowledge a campaign Signature	finance committee  The committee  Chairperson of the individual to the committee  of Chairperson	Committee a	nd that we hiplete. Date (mm/dd/y/) 9/29/202	FOR OFFICE USE ONLY IN CLERKS OFFICE  SEP 3 0 2021
ermitted for a candidate complection E. CERTIFICATE CERTIFICATE CONTROL OF CERTIFICATE CONTROL OF CENTRAL OF C	of the dual reperson mittee und ATION Cand the e best of chairperson candidate	ribs and responds a campaign der iC 3-9-1-7).  DE STATEME duly appointed our knowledge a principle Signature	finance committee  VI  Chairperson of the and belief it is true, as of Chairperson  Of Candidate	Committee a correct and com	nd that we hiplote. Date (mm/dd/y/) 9/29/202: Date (mm/dd/y/) 9/29/202:	FOR OFFICE USE ONLY IN CLERKS OFFICE  SEP 3 0 2021
ermitted for a candidate comp ECTION E. CERTIFICATE  The certify as the candidate  termined this statement. To the  Typed or Printed Name of Central Name of	of the dualiferson mittee und ATION Condition	niles and responder a campaign der iC 3-9-1-7).  DF STATEMIS duly appointed our knowledge a principle in this information because the superior of the campaign	finance committee  NI  Chairperson of the and belief it is tyle, as of Chairperson  of Chairperson  of Chairperson  s reported within ten (10)  (eleure /IC 3-14-1-13). A	Committee a street and com	nd that we he plets. Date (mm/dd/y) 9/29/202 Date (mm/dd/y) 9/29/202 singe (IC 3-9-1-10 to file a symptom	POR OFFICE USE ONLY IN CLERKS OFFICE  SEP 3 0 2021

(CFA-4)
Summary Sheet

State Form 4606 (R15 / 5-19) 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.

46-77-73

TOTAL PAGES IN ENTIRE CFA-4 REPORT

No IS THIS AN AMENDMENT? COMMITTEE INFORMATION Check if this is a new name. 1. Full Name of Committee (as on Statement of Organization) 3. Committee Telephone Number 2. Acronym oc/Abbreviated Name (if any) Check if this is a new address. 4. Mailing Address (Address where all campaign finance correspondence is received.) 6. Party Affiliation (if applicable) 5. City, State, ZIP Code Semocra CANDIDATE INFORMATION (For Candidate's Committees Only) 8. Party Affiliation or If Independent Candidate 7. Full Name of Candidate (Include any nickname.) 10. County of Residence 9. Office Sought, (Include district number, if any. Not required for exploratory committee. CONVENTION CANDIDATES ONLY TYPE OF REPORT Check one: 11. Check one: Pre-Convention Pre-Primary Pre-Election Annual Nomination Other Final / Disbands Committee (Lines 18, 19, and 20 must be '0'.) Use Outgoing Treasurer (Within ten (10) days amend Statement of Organization.) Post-Convention COLUMN A COLUMN B 12. Reporting Period (mm/dd/yy): Year to Date This Period Through: From: (2)13. Cash on hand and investments at the beginning of this reporting period. Ø 14. Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) 15a. Itemized (Use Schedule A.) 15b. Unitemized SUBTOTAL 15c. Add lines 15a and 15b in both columns 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. **TOTAL EXPENDITURES** (Note: These amounts include in-kind expenditures and loan repayments.) 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17b. Unitemized **SUBTOTAL** 17c. Add lines 17a and 17b in both columns. 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) TOTAL 22 19. Debts OWED BY the committee (Use Schedule D.) 20. Debts OWED TO the committee (Use Schedule E.)

	CERTIFICATION		FOR OFF	ICE USE	ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO	THE BEST OF MY KNOWLEDGE AND BELIEF IT I	S TRUE, CORRECT AND COMPLETE	IL	E	D
Signature of Treasurer	Title regula-	Date (mm/dd/s/y)	V CLERKS	OFFIC	CE
Signature of Capolidate (if applicable)		Date (mm/dd/yy) 1/16/2028	JAN 1	8 202	3
WARNING: Any information contained in this report may not to files a fraudulent report commits a Level 6 felony. (IC 3-14-Campaign Finance Law commits a Class B misdemeanor, (IC	1.13) A nerson who talls to the a complete of ac	3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)	Llaon	Stever	LS.
Campaign rinance Law Commiss a class of misdemeanor, fro	V 17 7 7 7 4 10 11 11 11 11 11 11 11 11 11 11 11 11		CELA POPE	<i>تەسلان</i> E CIRCUI	123 IT CC



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

	FILE NUMBE	R
Page	of	6

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
'Angela Welson Devitch 127 Lody LA	Contributions: Direct In-Kind (describe)	500-	500°°	10/6/21
Michigan City J.V (Contributor's Occupation (Il required) Business owner	Other Receipts: Interest Loan Miscellaneous (specify)			A.N.D.
2 Amber Ake 612 Holton Rd LAPORTE, Tw 46350 Contributor's Occupation (il required) Manager	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	1009,00	1000°°	11/4/21 A.N.D.
Porald & Sue Babcock 631 E Lakefront Beverly Thores IN 46301 Contributor's Occupation (if required) referred	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	1000°°	1000.	11/4/21 A.N.D.
* fessy & Kristen Thomas 5932 Quercus (ore Ct Charlotte MC 28217  Contributor's Occupation (if required) retired	Contributions: Direct tn-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	3w°°	300.	10/22/21 A.N.D.
5 Hashen Khalil  GOI Franklinst  Michigan City IJ  46360  contributor's Occupation (if required) Owner global SU	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	1000.	(200°°	11/1/21 A.N.D
SUBTOTAL	. THIS PAGE OF SCHEDULE A	\$ 3800°°		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

FI	LE NUMBE	ER
Page	of	6

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1709 John rue Are Midrigan City IN 46362	Contributions; Direct In-Kind (describe)	70000	5000	1915   2051
Michigan UM 20 46360  Contributor's Occupation (# required) retired	Other Receipts: Interest Loan Miscellaneous (specify)			ANP.
2 Sheridan Sand Sheet of	Contributions: Diffect In-Kind (describe)	.520,0	V00	12/19/21
Indianaed Jw 18002  Contributor's Occupation (if required)	Other Receipts: Disperse Loan Miscellaneous (specify)			A.W. D.
Paul Reilly Mary Pat Reilly 502 Colfax	Contributions: Direct In-Kind (describe)	2500"	52000	10/7/21
Bevoly Shares 46360 Contributor's Occupation (il required) refired	Other Receipts: Interest Loan Miscellaneous (specify)			A.N.D
That Bloch yan High land Dr Chester on In	Contributions: Direct In-Kind (describe)	500°°	Sooo	10/29/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	•		A.N.D.
Susan Anderson 2961 Lake Shore Dr	Contributions: Direct In-Kind (describe)	1000000	100000	idelde
long Beau Jn 46360 Contributor's Occupation (# required) refused	Other Receipts: Interest Loan Miscellaneous (specify)	#4500		A.N. O
	THIS PAGE OF SCHEDULE A	5,4500		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITER	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

FILE NUMBER						
Page	of					

	<u> </u>	•		<u> </u>
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
"CArol Any Brown	Contributions:			
	Direct			11/4/21
131 Shorewood Dr	In-Kind (describe)	100000	10.00	191161
Wichigan City IN	Other Receipts:	1000	(000)	
	☐ Interest ☐ Loan			
46362	Miscellaneous (specify)			A.N.D.
Contributor's Occupation (If required) Yetved	<u> </u>			
2	Contributions:			
Trac Development	Direct	12 W 25	. /	
409 W Poitte K	tn-Kind (describe)	7000	10000	11/4/2/
Michigan City TNX	Other Receipts:			
4(300)	Miscellaneous (specify)		<i></i>	A.N.D.
Contributor's Occupation (il required)				, , , , , , ,
" Michael Brennan	Contributions:			,
1 Come Districte	In-Kind (describe)	2• .	_	10 20 21
153 Barefoot Circle		250	2 TO°	101/2
Bonta forings th	Other Receipts:		٥٠	
l	Interest Loan			\ \ \ \
34134	Miscellaneous (specify)	·		A.N.D.
Centributor's Occupation (if required)		·		
Philip & the Latelford	Contributions:  Direct	<b>600</b>	23	
	In-Kind (describe)	20	250	11/4/21
439 Bayd Circle		C>,	, C 20	1777
	Other Receipts:	·		
Michigan City TN	Miscellaneous (specify)			A.N.D.
46360		4.1		A,W,D,
Contributor's Occupation (if required)	Contributions:			
Timothy & Patricia Enright	Direct		- `	
Timothy & Patricia Enright, 10329 storne	In-Kind (describe)	المحال	00	11/21
(1) TI		1000	$ \infty\rangle$	11101
Chicago, IL 60643	Other Receipts:	·		١ ،
. 200	Miscellaneous (specify)		•	A. N.D.
Contributor's Occupation (if required) OUNCY FOR ANOV			•	
	THIS PAGE OF SCHEDULE A	· 25007		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		
[Eural forgion (1) Eu	rva or the outlinery oneer)	L.,		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidates, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER						
Page 5 of 6						

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)  1 Sheridan Sands Investment 1926 W.  Indianapolis IN 46202	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	PERIOD \$256	# 258	RECEIVED BY
Brewery Loage 5727N. 600W	Contributions: Direct Direct Lo_Kind (describe)	#5000C	#102 <b>0</b>	10/6/21
Michigan City, IN 46360	Other Receipts:  Interest Loan  Miscellaneous (specify)	1020	1020	,
Meticulous Design 1828 N. Illinois	Contributions: Direct In-Kind (describe) Other Receipts:	\$1000	4000	11/4/21
Indianapolis, IN 46202	Interest Loan Miscellaneous (specify)			
Trac Development 409 Kieffer Rd	Contributions: Direct In-Kind (describe)	\$1000	\$1000	1/4/21
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Miscellaneous (specify)			
	THIS PAGE OF SCHEDULE A	327U_		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM	A ON THE LAST PAGE ONLY  1 15a of the Summary Sheet.)	1		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be Itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER					
	' <u>.</u>				
Page (	_of				

	The state of the s			
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A  AMOUNT THIS  PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED  (mm/dd/yy)  RECEIVED BY
DPBG PAC 9025 Rivered St 200	Contributions: Direct In-Kind (describe)	(an,		10/25/21
Tudituapolis IN 46245	Other Receipts: Interest Loen Miscellaneous (specify)	,, , <b>,,,,</b> ,		A.N.D.
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Miscellaneous (specify)			
3.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Miscellaneous (specify)	,		
4.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loen  Miscellaneous (specify)			
CIPTATAL	THE DACE OF COUEDING A	+ /at 500 .		
TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY	\$ 100000		
(Enter total on ITEN	15a of the Summary Sheet.)			



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

### (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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

- FILE NUMBER						
	,		,			
Page_	$\mathcal{Q}$	_ of	2			

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/da/yy)
Reprogrationally 18824 Michigan City Do 46360		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	180ge	Roso	12/8/21
code F Vartiv Economera		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	1.6	1.60	129/21
BreweyLodg 572 N 600W Michigan Caly In	146360	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	1020	1620	20/6/21
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			· -
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			,
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	1201-61		:
	SUBTOTAL THIS PAG	GE OF SCHEDULE B	\$		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON THI (Enter total on ITEM 17a of to	E LAST PAGE ONLY	\$ 2548, <b>1</b>		

### Amendment -

- . Inkind donation wasn't included on expense side \$10200
- · Also, there were companies that should have been instead of individual instead of individual

( ) M Dek



State Form 4606 (R15 / 5-19)
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

IS THIS AN AMENDMENT?

Yes | No

(CFA-4)
-Summary Sheet

FILE NUMBER

46-22-73

OTAL PAGES IN ENTIRE CFA-4 REPORT

	COMMITTEE INFORMATION		·-		
1. Full Name of Committee/(as on Statement of Organization		name.	. / / .		
Huge Nelson Duite	ey (ampaign	Com	mitte	<u>د</u>	
2. Acronym or Abbreviated Name (if any)	1 0	3. Com	mittee Telepl )	none Numb	per
4. Mailing Address (Address where all campaign finance co	rrespondence is received.)	Check if th	is is a new a	ddress.	
5. City, State, ZIP Code	11 14 2/1	6. Party	Affiliation (it		
Michigan Coty, U	V 76160			MOC	rat
	FORMATION (For Candidate's C	ommitte	es Only)		
7. Full Name of Candidate (Include any nickname.)		8. Party	Affiliation or Service	If Independ	dent Candidate
9, Office Sought (Include district number, if any. Not requir	ed for exploratory committee.)	10. Cou	inty of Resid		
Michigan City Common Con	141-Atlane		Lator	te.	
TYPE OF I	REPORT			CONVENT	TION CANDIDATES ONLY
11. Check one:				Check one	<i>:</i> .
Pre-Rrimary Pre-Election Annual Nomination	Other		· ·	Pre-Co	onvention
Final / Disbands Committee (Lines 18, 19, and 20 must be '0'.) Ou	tgoing Treasurer (Within ten (10) days amend Stat	ement of Org	anization.)	Post-C	Convention
12. Reporting Period (mm/dd/yy):	in lead and			A NML	COLUMN B
From: 1 2020 Through			This	Period	Year to Date
13. Cash on hand and investments at the beginning of this				<u>X</u>	
14. Cash on hand and investments January 1, current year.	_ <del></del>				
CONTRIBUTIONS AND					-
(Note: these amounts include in-kind contributions and loan 15a. Itemized (Use Schedule A.)	s, as well as cash contributions.)		•		'
15b. Unitemized					
15c. Add lines 15a and 15b in both columns.	SUBT	TOTAL			
16. Add lines 13 and 15c in Column A and lines 14 and 15c		TOTAL			
EXPENDITUR		TOTAL			
(Note: These amounts include in-kind expenditures and load		***			
17a. Itemized (Use Schedule B.) (Public Question: use Sch	<u> </u>				
17b. Unitemized					
17c. Add lines 17a and 17b in both columns.	SUB	TOTAL			1,
18. Cash on hand and investments at close of this reporting period (	Subtract 17c from 16 in both columns.)	TOTAL	<b>A</b>	<del> </del>	
19. Debts OWED BY the committee (Use Schedule D.)					
20. Debts OWED TO the committee (Use Schedule E.)	<u>`</u>		7	<del></del>	
	TIELOATION	,			ÉOR OCCICE USE ONLY-
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES	TIFICATION TOE MY KNOWLEDGE AND BELIEF IT IS T	BUE COR	RECT AND CO	ADI ETE!	FOR OFFICE USE ONLY
Signature of Treasurer	Title		ate (mm/dd/	(V)	CLERKS OFFICE
Ofreda K. Nelson	TRASURT		<del></del>	22	
Signature of Candidate (if applicable)	The state of the s		atel(mm/dd/	22	JAN 4 2023
WARNING: Any information contained in this report may not be copied	for sale or used for any commercial purpose.	(IC 3-9-4-5	A person who	knowinaly	
files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A p	person who fails to file a complete or accura	te report a	s required by the	ne India <del>na</del>	L/LAON Stores
Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14)	, and may be subject to civil penalties. (IC 3-9-	4-70, IC 3-9	1-4-17, IC 3-9-4	:16).	CIRCUIT COURT



2022 Annual Report

### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

(CFA-4) Summary Sheet

State Form 4606 (R15 / 5-19) 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 single

FILE NUMBER

We - 22 - 13

TOTAL PAGES IN ENTIRE CFA-4 REPORT

assistance in completing this form, see instructions on the reverse side.		TOTAL PAGES IN ENT	IRE CFA-4 REPORT
IS THIS AN AMENDMENT? Yes No		24	
COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)	name.	,	
2. Acronym or Abbreviated Name (if any)		mittee Telephone Number	
	(210	9 ) 229 - 27	140
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check if th	nis is a new address.	
5. City, State, ZIP Code		Affiliation (if applicable)	1
Michigan City, IN 46360  CANDIDATE INFORMATION (For Candidate's Ca		Democrat	
		y Affiliation or If Independe	nt Candidate
7. Full Name of Candidate (Include any nickname.) Angela Nelson Dewitch	o. Part)	Democrat	int Continuate
9. Office Southt (Include district number, if any. Not required for exploratory committee.)	10. Cot		
		unty of Residence La Parte	
TYPE OF REPORT		CONVENTIO	ON CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Con	
Final / Disbands Committee (Lines 18. 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend St	atement of Org	ganization.) Post-Co	nvention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: 1/1/2022 Through: 12/31/2022		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		15771.23	
14. Cash on hand and investments January 1, current year.			15771.20
CONTRIBUTIONS AND RECEIPTS  (Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)	•	42358	42,358
15b. Uniternized		5000 <b>.53</b>	5600,58
15c. Add lines 15a and 15b in both columns.	TOTAL	47,358.58	47,358.55
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	63,129.80	63,129.80
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		40,700,82	40,700.82
17b. Unitemized		1053,63	1053,63
17c. Add lines 17a and 17b in both columns.	BTOTAL	41,754.45	41,754,45
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	21,375.35	21,375,35
19. Debts OWED BY the committee (Use Schedule D.)		(b)	
20. Debts OWED TO the committee (Use Schedule E.)		9	
CERTIFICATION			FOR OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	TRUE, COR	RECT AND COMPLETE.	LED
Signature of Treasurer Dec Title 1/3950/0/	1	Date (mm/td/yy) IN C	LERKS OFFICE
Signature of Candidate (1) applicable		Date (mm/dd/yy) 3 A	N 18 2023
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpos	e. (IC 3-9-4-	5) A person who knowingly	
files a frauditent 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	9-4-16, IC 3	-9-4-17, IC 3-9-4-18)	leaver Stevens
		CIERK OF	LA PORTE CIRCUIT COURT





State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

Itemized Contributions and Other Receipts

	FIL	E NUME	ER	
Page _	<u> </u>	of	12	

33.44				DATE DECEIVED
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  (min dd-yy)  RECEIVED BY
James Nelson 1223 1/2, W. State Ro2	Confributions: Direct In-Kind (describe)	\$350	tr350	3/15/22
LAPORTE, IN 46350	Other Receipts: Interest Loan Miscellaneous (specify)  Ticket Fundais	er		AND
Jennifer Doubleday 144 Riviera Drive	Controlutions: Direct In-Kind (describe)	\$150	#150	3/28/22
MicHiGAN CITY, 1N 46360	Other Receipts: Interest Loan Miscellaneous (specify)  Ludra Ber Ticke	y		AUD
James Laughlin 4861 W. BOYLEVARD CT.	Contributions: Direct in Kind (describe)	\$ 200	\$200	3/28/22
Naples, FL 34103-3030	Other Receipts: Interest Loan Miscellaneous (specify)			AND
Mark+Judy Jacdol 128 Valentine Ct.	Contributions: Direct In-Kind (describe)	\$ 300	# 300	3/28/22
MICHÍGAN CITY, IN 46360	Interest Loan Miscellaneous (specify)			AND
5. SUSan VanCQ	Confibutions:	\$150	150	3/28/82
· -	In-Kind (describe)			
POBOX 946 BEVERLY SHORES, IN 46301	Other Receipts:  Interest Loan  Miscettaneous (specify)  Funder Sectional			AID
Contributor's Occupation (if required)	L THIS PAGE OF SCHEDULE A	\$ 1150		
TOTAL OF ALL PAGES OF SCHEDUL		1 8		





State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

Itemized Contributions and Other Receipts

	FILE	NUMBI	ER	
Page	2	of	12	

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	(mm:dd/yy) RECEIVED BY
Mike Schultz 5375 W 150 N LAPORTE, IN 46350	Contributions: Direct In-Kind (describe) Other Receipts:	\$150 \$25	<b>#</b> 175	3/28/22 11/21/27
Contributor's Occupation (# required)	Interest Loan Miscellaneous (specify)  Tickets Contributions:			
210 Kenwood PL	Direct In-Kind (describe)	# 200	\$200	5/13/22
Michigan City, IN 46360  Contributor's Occupation (# required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			AND
Sarah + James Johes 810 Earl Rd	Controlutions: Direct In-Kind (describo)	<b>\$500</b>	# 500	5/13/22
Michigan C144, 1N 46360 Contributor's Occupation (Il required)	Other Receipts: Interest Loan Miscellaneous (specify)			AND
Sel Dunlap 1401 W. Roosevert Ro APT III	Countbutions: Direct In-Kind (describe)	\$100	#100	5/13/22
Chicago, IL 60608-1308 Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			AND
Craig + Pam Dwight 296 DAK DRIVE LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)	teaco	#200	5/13/22
Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			AND
	THIS PAGE OF SCHEDULE A			
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

Itemized Contributions and Other Receipts

	FIL	E NUMB	ER	
Page	3	of	12	

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 (mini-ddiyy) RECEIVED BY
"Mary Ellen + John Quing	Counbuttons: Direct	<b>#5</b> 00		4/28/22
214 KENWOOD LN	in-Kind (describe)	\$105	\$625	11/21/22
MICHIGAN CITY, IN 46360	Other Receipts: Interest Loan Miscellaneous (specify)			AND
Contributor's Occupation (if required)	Contributions:			11/2×12
51818 OAKBROOK CT	Direct In-Kind (describe)	\$123	#123	4/20/22
GRANGER, IN 46530	Other Receipts: Interest Loan Miscellaneous (specify)			AND
Contributor's Occupation (if required)	Muscenarious (specify)			
3.	Contributions:	\$1000	#rX	4/28/22
Todd Connoe	in-Kind (describe)	# 400	\$ 1400	3/6/22
443 E. FURNESS RD	Other Receipts:			A ()
MICHIGAN CITY, IN 46360	interest Loan Miscellaneous (specify)			AND
Contributor's Occupation (If required) EMERSON HOUSE				
" Stephanie Oberlie	Confibrations:	\$500	# F N	4/28/22
405 E. LAKEFRONT DR.	n-Kind (describe)		\$500	
BEVERLY SHORES, IN 46301-0761	Other Receipts:			. (0
70301-0101	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			AND
Contributor's Occupation (if required)	<u> </u>			,
Bruee de Medici	Contributions:	\$100	x (W)	4/28/22
318 W. Adams ST.	In-Kind (describe)		# 100	' '
SUITE 1600	Other Receipts:			MACA
Chicago, 12 60606	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			AND
Contributor's Occupation (if required)	,			
	THIS PAGE OF SCHEDULE A	W/ W		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15e of the Summary Sheet.)			





State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

	FILE NUMBE	R
Page	of	12

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
Daryl Crockeft 209 Cleveland Ave	Contributions: Direct In-Kind (describe)	\$56O	#500	4/28/22
Michigan CH4, IN 46360  Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			WD
Brigitte Wood 1125 W. 10th Street	Contributions: Direct In-Kind (describe)	41200	\$ 200	4/28/22
Michigan City, 1N46360  Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			AND
McKinley Wells 113 Kaye Lane Michigan City IN 46360	ontributions: Direct In-Kind (describe)	#5000 #300	#5300	7/14/22
Michigan and He360  Contributor's Occupation (If required) General Confracto	Other Receipts:  Interest Loan  Miscellaneous (specify)			AND
Bennie + Theresa Edwards = 129 MEMORIAL DR	Contributions: Direct In-Kind (describe)	#250	# 25D	7/14/22
Michigan City, IN 46360  Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			AND
Ron + Alice Doran 800 INDIANA HWY 212 LOTIIN	Centributions: Direct In-Kind (describe)	4100	\$ 100	7/14/22
MICHIGAN CITY, IN 46360  Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	16 6350 T	WD	AND
SUBTOTAL '	THIS PAGE OF SCHEDULE A	· #3000		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM	A ON THE LAST PAGE ONLY if 15a of the Summary Sheet.)	3		





State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

FILE	E NUMBEI	₹
Page 5	of	12

(Street, number, city, state 21/2 coofe)  1. Allent Dava Bri585 108 Eddy St. Apr 212 Michigan City, IN 46360    Inkind (describe)   Inkind (descri	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)
Atlent Data Brisgs  108 Eddy St. APT 212  MICHIGAN City, IN 46360  Contributor's Occupation (Frequency)  2 Anna Live Say 167 Kaye Lane Michigan City, IN 46360  Contributor's Occupation (Frequency)  2 Anna Live Say 167 Kaye Lane Michigan City, IN 46360  Contributor's Occupation (Frequency)  3 Mithen Rice: 212 Hoosier DR Michigan City, IN 46360  Contributor's Occupation (Frequency)  Contributor's Occupation (Fr			[		RECEIVED BY
Contributor's Occupation (Frequency)   Cognitivators   Cocupation (Frequency)	Allen+ Cava Brisas	Direct	#100	1.	7/14/22
MICHIGAN CITY, IN 46360    Contributor's Occupation (I majurary)   Contributor's Occupation (I majurary)	108 Eddy St. APT 212	in-Kind (describe)		#100	
2 Anna Live Say 167 Kaye Lane Nichiard (describe) Nichiard (describe)  3 Mitch Rice 212 Hoosier Dr. Michiard (describe) Nichiard (describe) Nichia	MICHIGAN CITY, IN 46360	Interest Loan			AND
Anne Live Say 167 Kaye Lane MICHWAAT CITY, IN 46360  Contributor's Occupation (# required)  3 Mitch Rice 212 Hoosier DR Michigan (# required)  Contributor's Occupation (# required)  Substotal This Rode of Schebulle A on The Last Page only  Contributor's Occupation (# required)  Substotal This Rode of Schebulle A on The Last Page only  Contributor's Occupation (# required)  Substotal This Rode of Schebulle A on The Last Page only  Contributor's Occupation (# required)  Substotal This Rode of Schebulle A on The Last Page only  Contributor's Occupation (# required)	Contributor's Occupation (if required)				
Contributor's Occupation (I required)  Supering Contributor's Occupation (I required)  Substotal This page of Schedule a \$ 950  Total Of all pages of Schedule a on The Last Page on the L	Anna Livesay	Direct	1 .	#300	9/9/22
S. Mitch Rice  212 Hoosier DR Michigan City, IN  46360  Contributor's Occupation (frequired)  5. Charles Robert  143 Nilewood Dr.  LaParte, IN 46350  Contributor's Occupation (frequired)  5. Charles Robert  143 Nilewood Dr.  LaParte, IN 46350  Contributor's Occupation (frequired)  Substotal this Page of schedule a on the Last page only  Substotal this Page of schedule a on the Last page only  Substotal this Page of schedule a on the Last page only  Substotal this Page only  Substotal this Page of schedule a on the Last page only  Substotal this Page of schedule a on the Last page only  Substotal this Page only  Total of all Pages of schedule a on the Last page only  Substotal this Page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Substotal this Page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total of all Pages of schedule a on the Last page only  Total Only Total Only Total Only Total Only Total Only Total Only Total Only Total Only Total Only T	MICHIGIAN CITY, IN 46360	Interest Loan			
Mitch Rice.  212 Hoosier DR Michigan City, IN Hesso  Contributor's Occupation (if required)  5 Charles Robert 143 Nilbucod V. LaPorte, IN 46350  Contributor's Occupation (if required)  Contributor's Occupation (if required)  Contributor's Occupation (if required)  Contributor's Occupation (if required)  Substotal this page of schedule a on the Last page only  Substotal this page of schedule a on the Last page only  Substotal this page of schedule a on the Last page only  Substotal this page of schedule a on the Last page only  Substotal this page of schedule a squared  Substotal this page of schedule a squared  Total of all pages of schedule a on the Last page only  Substotal this page	Contributor's Occupation (if required)	*************			
AND  Contributor's Occupation (if required)  Substitutions:  Direct  In-Kind (describe)  Confidence (specify)  In-Kind (describe)  Other Receipts:  In-Kind (describe)  Other Receipts:  In-Kind (describe)  AND  Contributor's Occupation (if required)  Substitutions:  Direct  In-Kind (describe)  Confidence (specify)  TICKET  Substitutions:  Other Receipts:  In-Kind (describe)  AND  AND  Substitutions:  Direct  In-Kind (describe)  AND  AND  Contributor's Occupation (if required)  AND  Substitutions:  Other Receipts:  In-Kind (describe)  AND  AND  Contributor's Occupation (if required)  AND  Substitutions:  AND  AND	Mitch Rice.	Direct	<b>\$300</b>	#200	3/21/22
Contributor's Occupation (if required)  4 Patricia Boy 218 Southwood DR MICHIGAN City, IN 46360  Contributor's Occupation (if required)  5 Charles Robert 143 Nilewood Dr Laborte, In 46350  Other Receipts: In-Kind (describe)  Other Receipts: Interest   Loan   Miscellaneous (specify)  Ticket  Subtotal this page of schedule a \$ 950  Total of all pages of schedule A on the Last page only		Other Preside		0-	
4 Patricea Boy 218 Southwood DR MICHIGAN City, IN 46360  Contributor's Occupation (if required)  Contributor's Occupation (if required)  Contributor's Occupation (if required)  Substantial Ticket  Contributor's Occupation (if required)  Substantial Ticket  Contributor's Occupation (if required)  Contributor's Occupation (if required)  Substantial Ticket  Substantial Contributor (specify)  Ticket	46360	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			AND
MICHIGAN City, IN 46360  Contributor's Occupation (if required)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 950  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	A	Controutions:	,	<u> </u>	1/0/100
Contributor's Occupation (if required)  5. Charles Roberts Direct Direct Interest Loan Miscellaneous (specify)  LaParte, IN 46350  Contributor's Occupation (if required)  Contributor's Occupation (if required)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 950  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY			\$100	#100	1/21/22
Contributor's Occupation (if required)  5. Charles Roberts Direct	MICHIGAN City, 1N46360				AND
Contributor's Occupation (if required)  Contributor and Contri		Miscellaneous (specify)			
Contributor's Occupation (if required)  Substotal This Page of schedule a \$ 950  Total of all Pages of schedule a on the last Page only		Contributions			10/0-1-0
Contributor's Occupation (if required)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 9.50  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	Charles Roberts	Direct	pr 120	#151	12/20/22
Contributor's Occupation (if required)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 9.50  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	143 Nilewood Dr.	In-Kind (describe)		11,00	_
Contributor's Occupation (if required)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 9.50  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	LaPorte, IN 46350	☐ Interest ☐ Loan			AMD
SUBTOTAL THIS PAGE OF SCHEDULE A \$ 9.50  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY					
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY			\$050		
(Enter total on ITEM 15a of the Summary Sheet.)	TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

	FIL	E NUMB	ER	
Page _	6	of	12	

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
FULL MAILING ADDRESS (street, number. city. state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	(mm.dd/yy) RECEIVED BY
1 John engguist	Contributions: Direct	\$150 \$100	# >>>	2/08/22 4/24/22
301 Maple Street	In-Kind (describe)	# 25	#275	11/21   22_
Michigan City, IN 46360	Other Receipts:  Interest Loan  Miscellaneous (specify)			AND
Contributor's Occupation (if required)	Contributions:	\$150	# 200	3/15/22
Erica Miller	Direct	\$50	#200	11/21/22
1509 Springland Ave		1.50		, , ,
Michigan Coty IN 46360	Other Receipts:  Interest Loan			AND
	Miscellaneous (specify)  Tickets			
Contributor's Occupation (if required)	Contributions:			3/24/22
Matt Keavdon	Direct	# 150	#150	741/08
1336 Fran Lin	- Intercent (describe)			
MUNSTER, IN 46321	Other Receipts:			AND
	Miscellaneous (specify)  Tickets			
Contributor's Occupation (if required)	Contributions:			11/20/20
Alfreda Netsch	Direct	1023/moulle ky	JE087	4/29/22
126 LADY LN	n-Kind (describe)	1623/monthly 4/29+h		
Michigan City, IN 46360	Other Receipts:	1 par		AND
	Miscellaneous (specify)			1,100
Contributor's Occupation (if required)	Contributions:			
"Crystal Williams French	Contributions: Direct	\$500	4KW	3/6/22
3834 N Malaga DR.W	In-Kind (describe)	400	F Ju	
Crystal Williams French 3834 N Malaga DR.W LAPORTE, IN 46350	Other Receipts:			AND
	Miscellaneous (specify)			•
Contributor's Occupation (if required)		1000		
<b>,</b>	THIS PAGE OF SCHEDULE A	1000		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	M 15a of the Summary Sheet.)	\$		





State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

	FILE	NUMBE	R	
				٦
, , , , , , , , , , , , , , , , , , ,			12	-
Page		of	10	

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
Patnewilkin 13 Green Acres 10 Porte, IN 46350 owner Patricks	Conflutions: Direct In-Kind (describe)  Other Receipts: Interest Loan Miscellaneous (specify)	\$1000	#1066	2/9/2022 AND
2403 Shorewood DR	Confibutions: Direct In-Kind (describe)	<b>\$160</b>	<b>#150</b>	3/19/22
Long Beach, IN 46360	Other Receipts:  Interest Loan  Miscellaneous (specify)			AND
SZO Jefferson St	Conflibutions: Direct In-Kind (describe)	\$150	\$ 150	3/1/22
La PORTE, IN 46350  Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)  TICKEF			AND
Tany Biller 3223 N 525 W	Contributions: Direct tn-Kind (describe)	\$F300	#300	3/38/22
LA PORTE, IN 46350  Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			AVI
5 Joseph Bradey 645 E. North Share Dr. Brownstown, IN	Contributions: Direct In-Kind (describe)	#250	1250	12/2/22
Brownstown, IN 47220  Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)			AND
1	THIS PAGE OF SCHEDULE A	1000		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	EA ON THE LAST PAGE ONLY EM 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

Itemized Contributions and Other Receipts

FILE NUMBER				
Page _	8	of	12	

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION '	COLUMN A	COLUMN B	DATE RECEIVED imm ddyyl
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
Britney Burns	Contributions: Direct In-Kind (describe)	t5150	150	3/23/22
620 E. GARFIELD ST	Other Receipts:			1100
MICHIGAN CIPY, IN 46360	☐ Interest ☐ Loan ☐ Miscellaneous (specify) ☐ LCKEFS			AND
Contributor's Occupation (if required)	Contributions:	\$1300	14 0 ~ >	3/11/22
Charles Conlon	Direct In-Kind (describe)	#ac	#300	7.1
3155 ARRAN QUAY TER.	Other Receipts:			( )
Valparaiso, IN 46385	Interest Losn Miscellaneous (specify)			AND
Contributor's Occupation (if required)	<u>Tickets</u>			
3 Margaret Canningham	Contributions:	\$150	#150	3/20/22
2 C CRURT BLVD, APT 5	In-Kind (describe)		11 100	
MICHIGAN CITY, IN 46360	Other Receipts:			AND
4636	Miscellaneous (specify)			
Contributor's Occupation (if required)	Tickets		_	-1:/
* Jeff Deartch + Angil	Contributions: Direct	160 too	2400	3/6/22 monthly 244
+Angel	In-Kind (describe)	\$1500	3/6/2002	MONTHLY
Michigan City, IN 46360	Other Receipts:	1100 & MONT	WY Lot	AND
Businessiching		\$100 MOU \$100 24H \$100 eac	hmonth	
Contributor's Occupation (il required) Head Start	Contributions:			- 100 100
Matthew Dogan 216 HILLTOP Ave MICHIGAN CITY, IN 46361	Direct in-Kind (describe)	#300	#300	3/22/22
MICHIGAN CIPY, IN LIG 360	Other Receipts:			AND
1,000	Interest Loan Miscellaneous (specify)			שוא
Contributor's Occupation (# required)	Tickets	2010		
SUBTOTAL TOTAL OF ALL PAGES OF SCHEDUL	L THIS PAGE OF SCHEDULE A	\$3300		
TOTAL OF ALL PAGES OF SCHEDUL	EM 15a of the Summary Sheet)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

	FILE N	UMBE	R	
	•			
	9	····	10	
Page _		01	10	<u></u>

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
Abraham Dudley 2 492 W 250 S	Conflictions: Direct In-Kind (describe)	\$ 100 \$100	#adb	३/२४/२२ ४/२४/२२
LA PORTE, IN 46350  Contributor's Occupation (If required)	Other Receipts: interest Loan Miscellaneous (specify)			AND
2 Kathryn Eaten ) 1356 N. WOZNIAK RD	Confibutions: Direct In-Kind (describe)	\$150	# 15D	3/1/22
LAPORTE, IN 46350  Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)  Ticket			AND
Tim Enright 119 OVERHILL TRAIL	Confibutions: Direct In-Kind (describe)	\$560 ·	100	4/22/22
MICHIGAN CITY, IN 46360  Contributor's Occupation (if required)	Other Receipts:  Interest Loan  Miscellaneous (specify)		₩2	AND
Kenneth Fly 211 FULTON St	Combutions: Direct In-Kind (describe)	\$200 \$200 \$200	#600	3/7/22 4/27/22 12/14/22
Michigan City IN 146360 Contributor's Occupation (H required)	Other Receipts: Interest Loan Miscellaneous (specify)			AND
Braedon Gallas 209 DREAMWOLD VV MICHIANSA SHORES, IN 46360	entributions: Direct in-Kind (describe)	\$150	\$150	3/17/2022
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			AND
SUBTOTAL TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY	\$ 1600		
	M 15a of the Summary Sheet.)	\$	many management is a so	Notes in



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

Itemized Contributions and Other Receipts

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

FILE NUMBER
Page Of

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mnvdd/yy) RECEIVED BY
Jacqueline Goodall , 5814 CHOCTAW DR	Contributions: Direct In-Kind (describe)	#123	# 123	4/28/22
FOREST HEIGHTS, MD 20745	Other Receipts: Interest Loan Miscellaneous (specify)			AND
2 Hickael Gresham 2422 OHID ST.	Confibutions: Direct In-Kind (describe)	\$300	\$300	3/16/2022
MICHIGAN CIAY, IN 46360  Contributor's Occupation (if regulred)	Other Receipts: Interest Loan Miscellaneous (specify)			AND
Rob Harte 100 ANCHOR RD.	Contributions: Direct In-Kind (describe)	\$300 \$360	# 600	3/22/22 12/30/22
MICHIGAN CITY, IN 46360  Contributor's Occupation (if required)	Other Receipts: interest Loan Miscellaneous (specify) Tickets			AND
"Ursula Hemingway 4406 Stanville DR	Contributions: Direct In-Kind (describe)	\$16O	#100	ાચચાગ્ર
KATY, TX 77494  Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			MD
Sandra Hollingworth 1020 Wheatly Ct South BEND, IN 46614	Contributions: Direct In-Kind (describe)	#400	# 400	3/5/22
South Bend, IN 46614  Contributor's Occupation (If required)	Other Receipts: Interest Loan Miscellaneous (specify)  TICKES			AND
	THIS PAGE OF SCHEDULE A	\$ 1523	-	
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet.)			





State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

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

FILE NUMBER					
Page _	11	of 12			

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1 Jeremy Rossi 10329 South Hoyne Ave	Direct  In-Kind (describe)	\$300	\$300	12/27/22
Chicago, IL 60643	Other Receipts:  Interest Loan  Miscellaneous (specify)			AND
2 Lillian Spell 19905 Per Large Pass MANOR, TX 78653	Other Receipts:  Indicated Interest Loan  Miscellaneous (specify)	#23/month	<b>#</b> 207	4/29 monthly AND
3. Nichdas Meyek2302 Grassmere Dr.	Contributions; Direct In-Kind (describe)	150 250	#400	3/21/22
Long Beach, FL 46360  Contributor's Occupation (If required)	Other Receipts:  Interest Loan  Miscellaneous (specify)  Tickets			AND
Randall Stout =	Direct In-Kind (describe)	#100	\$100	12/27/22
1116 Ridge Street La Porte, IN 46350	Other Receipts: Interest Loan Miscellaneous (specify)			AND
5. John Van Prooyen Cela Holton Rd.	Ontributions: Direct In-Kind (describe)	#300	#300	3/17/22
Michigan City, IN46360	Other Receipts: Interest Loan Miscellaneous (specify)	4307	MARO	AND
Contributor's Occupation (if required)  SUBTOTAL	THIS PAGE OF SCHEDULE A	s 307		
TOTAL OF ALL PAGES OF SCHEDULE		\$		

13



#### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

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

FILE NUMBER						
Page _	12	of_	2			

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)	OR OTHER RECEIFT	PERIOD	YEAR-TO-DATE	RECEIVED BY
Sarah Hummel	Contributions: Direct In-Kind (describe)	#123	<sup>8</sup> 123	12/16/22
4706 Pennington Ct, H8	Other Receipts:		THE PROPERTY OF THE PROPERTY O	A.I.N.
Indianapolis, IN 46254	Interest Loan Miscellaneous (specify)		A	AND
Contributor's Occupation (if required)				
Stephanie Humphrey, 105 Longaerect APTB	Contributions; Direct In-Kind (describe)	\$150	150	4/28/22
	Other Receipts:			AND
YEADON, DA 19050	Interest Loan  Miscellaneous (specify)		na Andrews	AND
Contributor's Occupation (if required)			TEN 100 TEN 10	
3. Л д	Contributions:	\$ 150	Ь	341/22
Andrew Hynek	Direct In-Kind (describe)	W 150	150	3/4/22
3028 N. Sand Ridge Rd				
Rolling Prairie IN	Other Receipts:			AND
3028 N. Sand Ridge Rd Rolling Prairie, IN 46371	Miscellaneous (specify)			/,1 <u>D</u>
Contributor's Occupation (if required)	<u> Tickets</u>			, .
Bryan Koneczny	Contributions: Direct In-Kind (describe)	\$366	300	3/24/22
30 Marine DR'	Manus Annual Ann			
Michigan City, IN 46360	Other Receipts:		W-1-	AND
,	Miscellaneous (specify)			
Contributor's Occupation (if required)	Ticket			
* Kristie Pate >	Contributions: Direct	\$150	150	3/14/2022
1404 1 Street	In-Kind (describe)		100	
1404 L Street Laforte, IN 46350	Other Receipts:	Ad the control		MA
	Interest Loan  Miscellaneous (specify)			MU
Contributor's Decumption (if consignal)	Ticket			
Contributor's Occupation (if required)  SUBTOTAL	THIS PAGE OF SCHEDULE A	s 5272		
TOTAL OF ALL PAGES OF SCHEDULE		· 0/3		
(Enter total on ITEN	1 15a of the Summary Sheet.)	1 × 84100		

A7. (24158)



CONTRIBUTOR'S FULL NAME AND

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL. ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INX attendance 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 15g of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions (pagnitiess of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE	NUMBI	ER		
				•	
Page _	1	of	3	)	

FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS	COLUMN B	(mm/dd/yy)  RECEIVED BY
ROBINSON Engineento 17000 s. Park Ave of South Holland, MI 60473	Other Receipts:	#300	#360	3/28/22 AMS
203 Village Rd	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$15O	#150	3/28/22 AND
* Vintage Luxe Acres, IN Buse Acres, IN		\$15,000	\$10,000	2/1/22 AND
46304  4411 Innand Suites 4411 US Highway D  Michigan City, IN	Contributions: Olirect In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$ 1000 \$ 500	\$1500	3/28/22 11/21/22 AND
Lakeshove Eyeane 904 Parkway Ave ElKhart, IN 46516	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	#250	<b>\$250</b>	3/28/22 AND
	THIS PAGE OF SCHEDULE A	\$12,200	a the same	
TOTAL OF ALL PAGES OF SCHEDULE A	A ON THE LAST PAGE ONLY  1 15a of the Summary Sheet)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK at Information on this achedule. For assistance in completing this achedule, see instructions on the reverse side. This schedule is used to document contributions and receipts inteled on ITEM 152 of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a collendar year MUST be itemized on this schedule (over \$200, if requiser party committees). All transfers in end in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loon proceeds and repayments, retunds, rebates, returns of deposit, proceeds from setes, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE	NUMBER	
Page	2	3	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED mon dd yyr RECEIVED BY
" uptown Social 907 Franklin St	Contributions: Direct In-Kind (describe)	2500	# <i>2</i> 500	4/21/22
Michiganlity, IN 46360	Other Receipts: Interest Loan Miscellaneous (specify)			AND
Franklin Plaza 1919 E US Highway D	Contributions: Direct In-Kind (describe)	<b>\$</b> 500	#500	11/21/22
Michigan Gty, IN 46360	Other Receipts: Interest Loan Miscellaneous (specify)			AND
" MC Property Works 720 Franklin St	Contributions: Direct Direct In-Kind (describe)	\$ 1500	#1500	5/1/22
End Floor Michigan Cety, IN 46362	Other Receipts: Interest Loan Miscellaneous (specify) 25days/#60		1	AND
Mayfield Partnership 1919 E. US Highway 12	Contributions: Direct tn-Kind (describe)	<b>#500</b>	\$550	11/21/22
Hichigan City, IN 46260	Offier Receipts: Interest Loen Miscellaneous (specify)			AND
" Industrial Wirehasing 5254 W 500N	<u> </u>	\$500	<b>3</b> 500	11/21/22
5254 W 500N C Latorte, IN 46350	Other Receipts: Interest Leen Miscellaneous (specify)			AND
	THIS PAGE OF SCHEDULE A			
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)			

16



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION, COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE	NUMBER	
Page 3	of	3

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (nim/dd/yy) RECEIVED BY
Beechwood Development	Contributions: Direct In-Kind (describe)	<b>#500</b>	4550	11/21/22
Beechwood Development 1919 E.US Hwy B Michigan Cety, IN 46360	Other Receipts:  Interest Loan  Miscellaneous (specify)			AND
2.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Miscellaneous (specify)			
4.	Contributions: Direct tn-Kind (describe)		·	
	Other Receipts:  Interest Loan  Miscellaneous (specify)			
5.	Contributions:  Direct In-Kind (describe)			,
	Other Receipts:  Interest Loan  Miscellaneous (specify)			
SUBTOTAL  TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A	\$ 5500 ARR		
	1 15a of the Summary Sheet.)	18/300		

- 40,700.82 Total A



State Form

### (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

FI	LE NUMBER
Page	of

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, Z/P code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
Code		Direct In-Kind	2.25	B. T. I	3/3/22
Actrone		Payment of Debt Returned Contribution	121.80	#174	-11/7/22
366 Summer Street		Other	28.27		.77-
Somerville, MABRITH		Purpose: Online Donations	3.65 2.28		
Code F		☐ Direct ☐ In-Kind	1.39		
		Payment of Debt	4.53 9.29	\$253.96	1/11/22-
Vantiv Ecommerce 900 cheimsfood St		Returned Contribution  Other	9.80 5.45	•	12/9/22
		Purpose: Cred+	157.18	·	
Lowell, MA 01851		Processing Feet	43.6124		
Code		Direct In-Kind Payment of Debt		th2 No 69	1/6/22
Go Daddez		Returned Contribution		#20669	12/1/20
14455 N. Hayden Rd		Purpose: Web/ mon	61,		
Scottsdale, AZ 8524	5	domein /ohone	יעץ.		
Code		☐ Direct ☐ In-Kind		4089	1/4/20
		Payment of Debt  Returned Contribution	4829	1001	7 1190
Sera broup PKWY SteA		Other	1001		
Laforte, IN 46350		Purpose: Webste			
		Direct   In-Kind			
Code U		Payment of Debt	1 per	1900	1/4/20
Sera Group adjess		Returned Contribution  Other	1900	. 100	11 1100
John F (Add 5)		Purpose: Sectal			
		mediadev+		,	
Code		Direct In-Kind	IKI		5/2/22
( ( ( ) )		Payment of Debt Returned Contribution	mony	4360	monthly
Sera Group		Other	45/monsh		1101111
		Purpose: Month Ky Domain Int. 1500		_	
Code	THE REAL PROPERTY AND ADDRESS OF THE PARTY O	Direct In-Kind	A Medica	_	
1 1 Suia Horkson	nace.	Payment of Debt		#73.80	8 22-
1600 Am on the atre Park	TORY	Returned Contribution  Other			12/122
Google Suite Works 1600 Amphitheatre Parl Wountain Mew, CA 940	r3 -	Purpose:			10/100
		Fees for bout.	7057.4	15	
	SUBTOTAL THIS PAG		\$		
TOTAL OF ALL PA	GES OF SCHEDULE B ON TH (Enter total on ITEM 17a of t		\$		





State Form

## (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

	FILE NUM	BER
Page_	2 of	<u> </u>

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 F		Direct 🔲 In-Kind	#2000	0.0	1/6/22
untown Social		Payment of Debt Returned Contribution	# 1600	\$3600	4/25/22
Uptown Social 907 Franklin St		Other	- 1000		المحاركات
Michigan City INGLOSO		Kickoff-Funda	<b>B</b> (		
Code		Direct Dun-Kind		1m	1112120
Uptown Social		Payment of Debt Returned Contribution	2500	#2500	4/21/20
907 Franklinst.		Other			'
Michigan City IN 4630		Purpose: Kickoff Fahdrals	er		
1 1 1 1 1 1		Direct In-Kind	<u>~</u>		
Code O		Payment of Debt	#250	#250	3/21/21
Momma Sue Catering South Court		Returned Contribution  Other	Wall	+000	
	7	Purpose:	Cal		
Michigan City IN 463	NEV	Community Brank	Tast		
Code A WEFM		Payment of Debt	#990	#990	2/15/20
1903 Springland Ale		Returned Contribution	110	, 10	'
Michigan City, IN		Other			
Michigan City, IN 46360		RadioShaw			- 1 (00
E Shady Call		Direct In-Kind	43244.75		3/30/20
2030 Tryon Rd		Returned Contribution	4500.00	3958.75	3/3/02
Hadron Cd TAI		Other	\$214		3/25/20
Michigan (NYTW)	δ	FUNDIAISON 32			
	İ	Direct In-Kind	#	H DYN	2/21/2
Michigan City Hun SHE P.O. Box 4442 Michigan City IIN	4	Payment of Debt Returned Contribution	#300	#380	3/20/20
60 BX 4412		Other			
1 (2) 46361	· ·	St. Patty Parado	)		
F/0		Direct In-Kind			
Code F/U Caterins		Payment of Debt Returned Contribution	#300	#342	4/28/22
Sweetlan Catering 3200 Cleveland	) <del>  </del>	Other	本いつ		4/28/22 7/5/20
Jaco Civenos	<b>\( \)</b>	PURPOSE KICKOFF	#42		וואןמס
Michigan Coty IN 4636	Ψ	a) flotvict-larade			
U '		GE OF SCHEDULE B	\$ 11940,75		
TOTAL OF ALL F	PAGES OF SCHEDULE B ON TH	the Summary Sheet)	\$		



4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14) State Form

### (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE	NUME	BER
Page 3	of	8

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		Oirect In-Kind	luo F E	4.2 ÅX	116.4
Hope Community Center 222 McClelland		Payment of Debt  Returned Contribution	#300	#500	4/12/22
Michigan City JN		Purpose:		į.	
, , , , ,		Faculty Kental	i4	H	
Tavante Blately		Payment of Debt Returned Contribution	\$175	#175	4/20
Javante Blately 1847 S. Rolling Mead		Other			
Westulle, IN 46391		Decor Findage	/		
Code F Durght Marky		Direct In-Kind	#300	#38S	4/22
202 Whipportuil		Returned Contribution  Other			,
Trail Creek, IN 46360		Purpose:			
Code		Direct In-Kind	<b>\$</b> 350	torch	1422
Indiana Black Expo		Payment of Debt  Returned Contribution	*300	39P	4/22
450 St. John Rd Ste4		Other Purpose:			
Michigan City IN 46360		Corporate Lundea	1		
MC DOODATULANS		Payment of Debt	#1500	#1560	5/1/22-
MC Property works 720 Frankin Standel		Returned Contribution  Other	·		11/20/22
Michigan City, IN 4636	0	Facility-25days			
Code		Direct In-Kind Payment of Debt	\$ 250	#25O	11/04/10/10
1200 spring St		Returned Contribution  Other	- oce		400/2
Michigan City Tilogo		Purpose: Prode Sport Soll			
Code F		Direct In-Kind	*:0=	#125	المراء
Kevin Harmon		Payment of Debt Returned Contribution	#Q5	#125	4/05/27
2055. COURT		OtherPurpose:			
Michigan City TN 46360		Ondography			
	SUBTOTAL THIS PAG		\$ 3000		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON TH Enter total on ITEM 17a of t		\$		



4606 (R15 / 5-19)

Indiana Election Division (IC 3-9-5-14)

State Form

### (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE	NUMBER	
		•
Page	_ of _ <del>8</del> _	

DESCRIPTION AND AND AND ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMNIA	COLUMN R	DATE OF
RECIPIENT S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	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 (nim/dd yy)
NAACD-LaPoAe County PO BOX 755 Michigan Cay, IN 46201		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	\$ 500	#566	4/27/2
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			11.73
Hichigan (Ay Wamen's Commission TO E. My Lyant M	1	Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	#450	# 456	8/11/22
United Wary  422 Franklin St  Stute  Michigan City, IN		Diffect   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	#400 event	\$ 400	8/19/22
Code_ Pricengartery, are		Direct In-Kind Payment of Debt Raturned Contribution Other Purpose:	_		- 1
Michigan City High Scho 8466 W. Pahor Michigan Cety, Ja	1 14.26x	Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	# 500	\$500	8/30
WIMS Rad 10 685 F. 1675N		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	12500	\$2500	9/12
Michigan Cety, IN	46360	Radio Ads Shoul	7.	• •	ĺ
TOTAL OF ALL 5	SUBTOTAL THIS PA		\$4350		
TOTAL OF ALL P	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of the contract of the contr		\$		





State Form

### (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

	FILE	NUME	BER	
Page	5	of _	8	

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)
BAC Harketing 7654 US-20 Michigan City IN 4626	Þ	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	#200)	\$ <i>2</i> 88	10/26/2
4 Invarint, 101 Commerce Oshkosh, WI-54901		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	# 751.89	<b>\$751</b> ∕89	10/26/22
Code C IN Democratic Party 101 Washingtonst. Stell Indianapolis, IN 4020+	10	Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	#255	<i>\$25</i> 5	12/1/23
BIG LOTS HITO Franklin St Hichigan City IIN 46360	-	Returned Contribution	\$38.52 \$264.76	# <i>3</i> 03,18	7/11/22 22/16/31
Hobby Lobby 4351 Francin Michigan City IN 41636		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	*189.43 *69.41	\$258.89	3/24/22 4/22/22
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		\$ 1769.06		
TOTAL OF ALL PA	\$				





State Form

### (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

	FILE NUMBER	
Page _	6 of 8	_

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS   PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
Code F/O		Direct In-Kind	54.97	13	4/19/22
Party City		Returned Contribution Other	238.16	16893,13	4/19/22
2410 La Poste Ap	77	Purpose: Event + Office Supplie		No.	
Code		Direct In-Kind	\$1440		7/13/2002
LaHar Media		Returned Contribution	1500	2940	1/13/2002
9900 Georgie St Crown Pt. 46307		Purpose:			•
Code A / F		Direct In-Kind  Payment of Debt		\$482.91	4/22/5
Facebook-Metar Hackerway		Returned Contribution			12/22
Hacker way		Purpose: Foce late:			
Mento Park, CA 9402	P	Ads + Fordrai Sut	200	0K)	
Down example of Arch		Payment of Debt Returned Contribution	206	10/101	1/10/22 7/18/22 4/20/22
Reprographic Arts	,	Other	516.97	\$10	4/20/22
2824 E Michigan Blue Michigan City Za	46360	Purpose:	575.00	**	7/1/22
	}	Direct In-Kind		H _ 25	110 100
WM Photography 208 Laura Lan		Returned Contribution	4550	4550	4/21/22
Chicago Heights I	<b>←</b> .	Purpose: Videara(NCC			
WAR AND	0411	B 6077			
Code Shady are	7	Direct In-Kind Payment of Debt			
2021		Returned Contribution  Other			
29 39 39		Purpose:			
Code F/A		Payment of Debt	5717 F	2015	10/17/23
The Beacher		Returned Contribution	12 984	¥130.15	11/2/122
911 Franklin St.		Purpose: Tickels()	10.10.		bilas
Michigan City, IN 463	360	Business Gods (5)	<u></u>		
,	SUBTOTAL THIS PA		\$6073.14		
TOTAL OF ALL P	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of		\$		





State Form

### (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

4606 (R15 / 5-19) Indiana 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 NUM	BER
Page _	of	2

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION  OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Galveston's Warshirt 10 Commerce Squar	<i>y</i>	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Brunch exp	#2000 ense	2660	1/2/2
AMAZON 440 Terry Ave N SeatHe, WA 98109		Direct In-Kind Payment of Debt Decor Returned Contribution Other Purpose: Kickoff, fur Shudycreek, brunc	trausing	\$629.99	3/22-
Amazon alges		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Cups/ Plastic table Cloths, office		\$494.I	3/22-
Go Union Printing 2668 9th St. North St. Petersburg FL 3370	ste 302 4	Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	<sup>#</sup> 104.43	MH.43	12/19/2
Jimmy Johns. 5340 Frankly		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose: Elachology		*142.13	11/9/22
Lowes 46360 5200 franklin st		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose: Jaides/	b2 <i>3</i> 1.03	\$231 <u>.</u> B	5 23 22
office Max JN4631 210 US-20E	b d	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: INK paper SUPPLES	\$111.79 103.58 46.68 122.53	#39198	6/27/22 8/29/22 6/8/22 7/5/22
TOTAL OF ALL F	SUBTOTAL THIS PA PAGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of	GE OF SCHEDULE B IE LAST PAGE ONLY the Summary Sheet)	\$ 3999.66 \$		

#3999,66





State Form

## (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

2 - 2		FILE NU	MBER	
$\Delta$ - $\alpha$				
Page of	Page _	3.	) <b>S</b>	<b>&gt;</b>

RECIPIENT'S NAME AND MAILING ADDRESS istreet, number city, state, ZIP codel	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)
303 Washing to 154 St		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	126 120 132	3120	11/14 3125 618
Vista Print 275 Wyman St Waltham, MA 02451		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: BUHFONS, SHICKERS, Chips, e.f.	173.62 223.98 326.93 138.20	15114846	12/12 3/18 3/28 2/6 4/4
Walmart 46360 5780 Franklin St		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose: Land   + Office Supp   6	116.44 264.86 78.42	459,70	10/19 6/29 7/1
ATHT 46360 5182 Franklinst.		Direct In-Kind Payment of Debt Returned Contribution Other Burpose: Caupaish Philo	421.58	<b>≠</b> 421,58	11/10
ATHT MONHAI,  5182 Franklin St		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Hawking Phase	\$54.5Q \$54.5Q	109,04	11/9 12/7
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	<del>-</del>	AGE OF SCHEDULE B	\$ 2510.76		
TOTAL OF ALL F	PAGES OF SCHEDULE B ON TI (Enter total on ITEM 17a of	HE LAST PAGE ONLY the Summary Sheet.)	\$ 2515.76 \$ 40,760.8		