

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

IS THIS AN AMENDMENT? Yes V

(CFA-4) Summary Sheet

| FILE NUMBER | | | | | | |
|------------------------------------|--|--|--|--|--|--|
| 1410-22-17 | | | | | | |
| TOTAL PAGES IN ENTIRE CFA-4 REPORT | | | | | | |
| 10 | | | | | | |

| COMMITTEE INFORMATION | | | |
|---|-----------------------|---|--------------------------|
| Full Name of Committee (as on Statement of Organization) Check if this is a new Committee to Elect John Lake Prosecutor Check if this is a new Committee to Elect John Lake Prosecutor | v name. | | |
| 2. Acronym or Abbreviated Name (if any) | 3. Commit (219 | tee Telephone Number) 448-1208 | |
| Mailing Address (Address where all campaign finance correspondence is received.) P.O. Box 9216 | Check if this i | s a new address. | |
| 5. City, State, ZIP Code Michigan City, IN 46361 | 6. Party Af Democ | filiation <i>(If applicable)</i> ratic | |
| CANDIDATE INFORMATION (For Candidate's | Committees | Only) | |
| 7. Full Name of Candidate (Include any nickname.) John Lake | 8. Party Af Democ | filiation or If Independent cratic | Candidate |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.) Prosecuting Attorney of LaPorte County, 32nd Judicial Circuit | 10. County LaPorte | of Residence e | |
| TYPE OF REPORT | | CONVENTION | CANDIDATES ONLY |
| 11. Check one: | | Check one: | |
| Pre-Primary ☐ Pre-Election ✔ Annual ☐ Nomination ☐ Other | | Pre-Conve | ntion |
| Final / Disbands Committee (Unes 18, 19, and 20 must be 10.) Outgoing Treasurer (Within ten (10) days amend S | tatement of Organiza | ation.) Dost-Conve | ention |
| 12. Reporting Period (mm/dd/yy): (From: 1/1/2021 Through: 12/31/2021 | | COLUMN A This Period | COLUMN B Year to Date |
| 13. Cash on hand and investments at the beginning of this reporting period. | | 129.85 | |
| 14. Cash on hand and investments January 1, current year. | | | 9,823.00 |
| CONTRIBUTIONS AND RECEIPTS | | | |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) | | | |
| 15a. Itemized (Use Schedule A.) | | 11,319.98 | 0.00 |
| 15b. Unitemized | · | 550.00 | 0.00 |
| 15c. Add lines 15a and 15b in both columns. | BTOTAL | 11,869.98 | 0.00 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. | TOTAL | 11,999.83 | 9,823.00 |
| EXPENDITURES | | | |
| (Note: These amounts include in-kind expenditures and loan repayments.) | | | |
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) | | 1,880.03 | 0.00 |
| 17b. Unitemized | | 296.80 | 0.00 |
| 17c. Add lines 17a and 17b in both columns. | BTOTAL | 2,176.83 | 0.00 |
| | | | 9,823.00 |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) | TOTAL | 9,823.00 | 0,025.00 |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) | TOTAL | 9,823.00 7,111.60 | 0,020.00 |
| | TOTAL | | 0,020.00 |

| 19. Debts OWED BY the committee (Use Schedule D.) | 7,111.00 |
|---|--|
| 20. Debts OWED TO the committee (Use Schedule E.) | 0.00 |
| CERTIFICATION | FOR OFFICE USE ONLY |
| CONTRY THAT HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE Title Treasurer | CORRECT AND COMPLETED I L E D Date (mm/dt/yy) IN CLERKS OFFICE |
| Signature of Candidate (if applicable) | Date (mm/d/yy) 1/18/2022 JAN 1 8 -2021 |
| WARNING: Any information contained in this report may not be copied or sale or used for any commercial purpose. (IC 3 files a fraudulent report commits a Level 6 felody. (IC 3-14-1-13) A person who falls to file a complete or accurate re Campaign Finance Law commits a Class/B missemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16) | 3-9-4-5) A person who knowingly eport as required by the Indiana 20072 |
| | CLERK OF LA PORTE CIRCUIT COURTS |



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 | | | | |
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| | | | | |
| Page _ | 2. | 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 |
|---|---|-----------------------------------|--|---------------------------------------|
| ^{1.} Joanne T. Gorecki 1515 Michigan Avenue LaPorte, IN 46350 | Contributions: Olirect In-Kind (describe) | | - | 09/20/2021 |
| Contributor's Occupation (# required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$500.00 | \$500.00 | Mary Lake |
| 2 Mike Mollenhauer 1510 Michigan Ave. LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$10 0.00 | \$100.00 | Mary Lake |
| 3. Jean Lange 308 Fieldstone Dr. LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specily) | \$100.00 | \$100.00 • | Mary Lake |
| ⁴ Barry McDonnell Drawer K Michigan City, IN 46360 | Contributions: Direct | | | 09/20/2021 |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$500.00 | \$500.00 | Mary Lake |
| ^{5.} John Stimley 3205 Tilden Ave. Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100!00 | \$100.00 | Mary Lake |
| SUBTOTAL T | HIS PAGE OF SCHEDULE A | \$ 1,300.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A | ON THE LAST PAGE ONLY | \$ | | |



(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 lotated 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 catendar 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 catendar year. Otherwise, this is optional.

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| Page _ | 3 | _of_10 | | |

| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A | COLUMN B | DATE RECEIVED (mm/dd/yy) |
|---|---|-----------------|--------------|--------------------------|
| (street, number, city, state, ZIP code) | OR OTHER RECEIPT | PERIOD | YEAR-TO-DATE | RECEIVED BY |
| ^{1.} Paul Vincent 1516 Michigan Avenue LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| Contributor's Occupation (if required) | Other Receipts: interest Loan Miscellaneous (specify) | \$200.00 | \$200.00 | Mary Lake |
| ² Deraid and Sue Borton 800 Indiana Hwy 212, Lot B5N Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Mary Lake |
| ³ Randy Novak 7000 W 125 N LaPorte, IN 46350 | Contributions: Direct tn-KInd (describe) | | | 12/23/2021 |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Mary Lake |
| Angie Nelson Deuitch 126 Lady Ln Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | , | 09/22/2021 |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Mary Lake |
| 5. Dennis Caviston 1907 Michigan Avenue LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Mary Lake |
| SUBTOTAL | THIS PAGE OF SCHEDULE A | \$ 600.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM | ON THE LAST PAGE ONLY 15s of the Summary Sheet.) | \$ | | |



State Form 4506 (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 proceed 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.

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| Page | 4 | of | 10 | |

| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS | TYPE OF CONTRIBUTION | COLUMN A | COLUMN B | DATE RECEIVED (mm/dd/yy) |
|--|---|-----------------------|----------------------------|--------------------------|
| (street, number, city, state, ZIP code) | OR OTHER RECEIPT | AMOUNT THIS PERIOD | CUMULATIVE YEAR-TO-DATE | RECEIVED BY |
| 1. Carol McDaniel 10088 East State Road 4 Walkerton, IN 46574 | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| Contributor's Occupation (d required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Mary Lake |
| ² Nancy Hawkins 7128 N. 300 W Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Mary Lake |
| 3 Jacquelyn McClintock 4177 Cindy Lane Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscetianeous (specify) | \$100.00 ⁻ | \$100.00 | Mary Lake |
| Andrew Hynek 3028 N. Sand Ridge Rd. Rolling Prairie, IN 46371 | Contributions: Direct in-Kind (describe) | | 09/20/2021 | |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$1 0 0.00 | \$100.00 | Mary Lake |
| ^{5.} Michael Schultz 5375 W. 150 N. LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | 0920/2021 |
| Contributor's Occupation (# required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Mary Lake |
| SUBTOTAL ' | THIS PAGE OF SCHEDULE A | \$ 500.00 | | |
| 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

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, rebetes, 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 | | | | |
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| Page_ | 5 | of | 10 | |

| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS | COLUMN B | DATE RECEIVED (mm/dd/yy) |
|---|---|-------------------------|--------------|---|
| (street, number, city, state, ZIP code) | | PERIOD | YEAR-TO-DATE | RECEIVED BY |
| 1. Mark Roule | Contributions: | | | |
| 1248 S Redbud Dr. | Direct | | | |
| LaPorte, IN 46350 | In-Kind (describe) | | | 09/20/2021 |
| Edit ofter its research | | | | |
| | Other Receipts: | \$100.00 | \$100.00 | |
| | interest Loan | | | |
| | Miscellaneous (specify) | | 1 | Mary Lake |
| Cantilludada Dagundia (f. gauled) | | | | |
| Contributor's Occupation (if required) | Contributions: | | | |
| 2 | Direct | | | |
| | ☐ In-Kind (describe) | | ł | ł |
| | | | | |
| | | | | |
| · | Other Receipts: | | | l , |
| | Miscellaneous (specify) | | | i · |
| | Miscellaliedus (specily) | | | |
| Contributor's Occupation (# required) | | | | |
| 3. | Contributions: | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | ☐ Direct | | | |
| | n-Kind (describe) | | İ | |
| | | | | |
| | Other Receipts: | | | |
| | ☐ Interest ☐ Loan | | | |
| | Miscellaneous (specify) | | | |
| Contributor's Occupation (if required) | | | | |
| 4, | Contributions: | | | |
| * | Direct | | | |
| | In-Kind (describe) | | | |
| | | | | |
| • | Other Receipts: | | | |
| | Interest Loan | | | |
| | Miscellaneous (specify) | | | |
| | - | | | |
| Centributer's Occupation (if required) | | | <u> </u> | |
| 5. | Contributions; | | | ļ |
| | ☐ Direct | | | |
| | ☐ In-Kind (describe) | | İ | |
| | | | | |
| | Other Receipts: | | | |
| | Interest Loan | | | |
| | Miscellaneous (specify) | | | |
| Contributor's Occupation (# required) | | | | |
| | THE BACE OF COMEDING A | \$ 400.00 | | |
| ! | THIS PAGE OF SCHEDULE A | \$ 100.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE | 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)

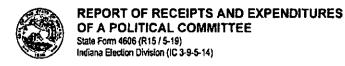
(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

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 lotated 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, rebales, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

| | FIL | E NUMBER | |
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| Page | 6 | of | D |

| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED (mm/dd/yy) RECEIVED BY |
|--|---|-----------------------------------|--|--------------------------------------|
| (street, number, city, state, ZIP code) 1. Kora Holdings, Inc. 105 Woodside Drive Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | \$100.00 | | 09/20/2021 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Mary Lake |
| MBK Holdings Inc. 110 Franklin Street Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| · | Other Receipts: Interest Loan Miscelleneous (specify) | \$400.00 | \$400.00 | Mary Lake |
| | Contributions: Direct In-Kind (describe) | | | |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | | |
| • | 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 | \$ 500.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE | A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.) | \$ | | |



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

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEOULE. 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, reluins of deposit, proceeds from seles, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

| FILE NUMBER | | | | |
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| | | | | |
| Page _ | 7. | _ of _ | 10 | |

| 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 |
|--|---|-----------------------------------|--|--|
| IN KY OH Regional Council of Carpenters INDIANA COPE 771 Greenwood Springs Dr. | Contributions: Direct In-Kind (describe) | | | 09/20/2021 |
| Greenwood, IN 46143 | Other Receipts: Interest Loan Miscellaneous (specify) | \$5,000.00 | \$5,000.00 | Mary Lake |
| 2 | Contributions: Direct In-Kind (describe) | | | |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | - | |
| 3. | Contributions: Direct In-Kind (describe) | | | · |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | | |
| • | 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 | \$ 5,000.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE | | \$ | | |



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 contributor, within a calendar year MUST be itemized on this schedule (over \$200 if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

| FILE NUMBER | | | | |
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| Page _ | 8 | of | 10 | |

| CONTRIBUTOR'S FULL NAME AND | TYPE OF CONTRIBUTION | COLUMN A | COLUMN B | DATE RECEIVED (mm/dd/yy) |
|---|--|--------------------|----------------------------|-----------------------------|
| FULL MAILING ADDRESS (street, number, city, state, ZIP code) | OR OTHER RECEIPT | AMOUNT THIS PERIOD | CUMULATIVE YEAR-TO-DATE | RECEIVED BY |
| Hendricks for Surveyor Committee 6833 W. Linda Ln Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) Other Receipts: | \$100.00 | \$100.00 | 09/20/2021 |
| | Interest Loan Miscellaneous (specify) | | | Mary Lake |
| Dunes Cafe & Development 3103 US HWY 12 Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | \$500.00 | \$500.00 | 09/20/21 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | | Mary Lake |
| Wildwood LŁC dba Alpha Storage 1002 West Green Street Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | \$100.00 | \$100.00 | 09/20/2021 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | , | | Mary Lake |
| ⁴ Friedman & Associates 705 Lincolnway LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | \$500.00 | \$500.00 | 09/22/2021 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$300.00 | , | Mary Lake |
| 5. Jimmy Johns 121 J Street LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) Food for Fundraiser | \$119.98 | \$119.98 | 09/17/2021 |
| · | Other Receipts: Interest Loan Miscellaneous (specify) | V 113.30 | Ф119.30 | Mary Lake |
| SUBTOTAL | THIS PAGE OF SCHEDULE A | \$ 1,319.98 | | |
| TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE | A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.) | 5 9,319.98 | | |



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 | NUME | BER | |
|-------|------|--------|-----|--|
| | | | | |
| Page_ | 9 | _ of _ | 10 | |

| RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code) | RECIPIENT'S OCCUPATION | TYPE OF EXPENDITURE | COLUMN A AMOUNT THIS | COLUMN B | DATE OF EXPENDITURE |
|---|-------------------------------|---|-------------------------|--------------|---------------------|
| | OFFICE SOUGHT (if applicable) | PURPOSE (be specific) | PERIOD | YEAR-TO-DATE | (mm/dd/yy) |
| Code F Walmart 333 Boyd Blvd. LaPorte, IN 46350 | Retailer | Direct In-Kind Payment of Debt Returned Contribution Other Drinks, plates, etc. Purpose: Fundraiser | \$213.13 | \$213.13 | 09/15/2021 |
| John Coulter 5433 S Hwy 421 Westville, IN 46391 | Farmer | Direct In-Kind Payment of Debt Returned Contribution Pork Chops Purpose: Fundraiser food | \$300.00 | \$300.00 | 09/17/2021 |
| Legacy Hills Golf Course 299 W Johnson Road LaPorte, IN 46350 | Golf Course | Direct In In Kind Payment of Debt Returned Contribution Other Golf expesses Purpose: Fundraiser | \$865.00 | \$865.00 | 09/21/2021 |
| Meijer 5150 Franklin Street Michigan City, IN 46360 | Retailer | Direct In-Kind Payment of Debt Returned Contribution Officer Food & Prize Purpose: Fundraiser | \$123.54 | \$123.54 | 09/15/2021 |
| Jimmy Johns 121 J Street LaPorte, IN 46350 | Restaurant | Direct In-Kind Payment of Debt Returned Contribution Other Food Purpose: Fundraiser | \$248.36 | \$248.36 | 09/17/2021 |
| Lowe's Home Centers, LLC 5200 Franklin Street Michigan City, IN 46360 | Retailer | Direct In-Kind Payment of Debt Returned Contribution Other Gift Cards Purpose: Fundraiser | \$130.00 | \$130.00 | 09/14/2021 |
| Code | | ☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: | | | |
| | SUBTOTAL THIS PAG | E OF SCHEDULE B | \$ 1,880.03 | | |
| TOTAL OF ALL PA | GES OF SCHEDULE B ON THE | | \$ 1,880.03 | | |



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. A lender's occupation is required if an Individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

| FILE NUMBER | | | |
|-------------|----|----------------|--|
| | | | |
| Page _ | 10 | _of_/ <i>D</i> | |

| CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS | ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any) | AMOUNT | DATE DEBT INCURRED | CUMULATIVE PAID | OUTSTANDING BALANCE THIS |
|--|---|-------------------------------|-----------------------|-----------------|-----------------------------|
| (street, number, city, state, ZIP code) | (street, number, city, state, ZiP code) | NATURE OF DEBT | (min/dd/yy) | YEAR-TO-DATE | PERIOD |
| Mary Lake 4968 N. Hunters Glen LaPorte, IN 46350 | | \$7,500.00 | 10/3/2018 | \$0.00 | \$5,111.60 |
| LENDER'S OCCUPATION: Attorney | | Original Loan | | ***** | |
| Mary Lake 4968 N. Hunters Glen LaPorte, IN 46350 | | \$2,000.00 | 09/15/2021 | \$0.00 | \$2,000.00 |
| LENDER'S OCCUPATION: Attorney | | Fundraiser Loan | | | |
| | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| | | | | | , |
| LENDER'S OCCUPATIONS | | | | | |
| | | | | | |
| LENDER'S OCCUPATION. | | | | | |
| | | | | | |
| LENDER'S OCCUPATION. | <u> </u> | | | | |
| | TOTAL OF AL | SUBTOTA L PAGES OF SCHEDUL | | ST PAGE ONLY | \$ 7,111.60 |
| | TOTAL OF ALI | (Enter total on l | TEM 19 of the S | ummary Sheet.) | \$ 7,111.60 |



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? Tyes V No

(CFA-4) Summary Sheet

FILE NUMBER

HU-77-17

TOTAL PAGES IN ENTIRE CFA-4 REPORT

| COMMITTEE INFORMATION | | | |
|---|----------------------|---|--------------------------|
| Full Name of Committee (as on Statement of Organization) Committee to Elect John Lake Prosecutor Check if this is a new respective. | | | |
| 2. Acronym or Abbreviated Name (if any) | | tee Telephone Number) 448-1208 | |
| 4. Mailing Address (Address where all campaign finance correspondence is received.) P.O. Box 9216 | | is a new address. | |
| 5. City, State, ZIP Code Michigan City, IN 46361 | 6. Party At Democ | ffiliation <i>(if applicable)</i> cratic | <u> </u> |
| CANDIDATE INFORMATION (For Candidate's C | ommittees | only) | |
| 7. Full Name of Candidate (Include any nickname.) John Lake | 8. Party Al Democ | ffiliation or If Independen cratic | t Candidate |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.) Prosecuting Attorney of LaPorte County, 32nd Judicial Circuit | 10. County LaPort | y of Residence e | |
| TYPE OF REPORT | | CONVENTIO | N CANDIDATES ONLY |
| 11. Check one: Pre-Primary Pre-Election Annual Nomination Other | | Check one: Pre-Conv | |
| Final / Disbands Committee (Lines 18, 19, and 20 must be *0*.) Outgoing Treasurer (Within ten (10) days amend State | ement of Organia | rauon.) | |
| 12. Reporting Period (mm/dd/yy): From: 1/1/2022 Through: 4/8/2022 | | COLUMN A This Period | COLUMN B Year to Date |
| 13. Cash on hand and investments at the beginning of this reporting period. | | 9,823.00 | |
| 14. Cash on hand and investments January 1, current year. | | | 9,823.00 |
| CONTRIBUTIONS AND RECEIPTS | | | |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) | | 350.00 | 350.00 |
| 15a. Itemized (Use Schedule A.) | | 0.00 | 0.00 |
| 15b. Uniternized | TOTAL | 350.00 | 350.00 |
| 136. Add Intes 138 and 138 in both columns. | TOTAL | 10,173.00 | 10,173.00 |
| EXPENDITURES | , 47174 | 10,110.00 | , |
| (Note: These amounts include in-kind expenditures and loan repayments.) | | | |
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) | | 350.00 | 350.00 |
| 17b. Unitemized | | | 0.00 |
| | TOTAL | 350.00 | 350.00 |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) | TOTAL | 9,823.00 | 9,823.00 |
| 19. Debts OWED BY the committee (Use Schedule D.) | | 7,111.60 | |
| 20. Debts OWED TO the committee (Use Schedule E.) | - | 0.00 | |
| 20,000,000,000 | | | |

| 20. Depts OWED 10 the committee (Use Schedule E.) | | |
|--|---|-------------------------------|
| CERTIFICATION | | FOR OFFICE USE ONLY |
| I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS Signature of Dreasurer Title Treasurer | S TRUE, CORRECT AND COMPLETE. Date (mm/dd/yy) 4/12/2022 | FILED IN CLERKS OFFICE |
| Signature of Candidate (if applicable) | Date (mm/dd/yy) 4/12/2022 | APR 1 2 2022 |
| WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpos files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or acc Campaign Finance Law commits a Class B misderpeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-14-1-14) | curate report as required by the inplana | 1/100 24 |
| | <u></u> | LERK OF LA PORTE CIRCUIT COUR |



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

Itemized Contributions and Other Receipts

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

| | FILE | NUMBE | R | |
|--------|------|-------|---|--|
| | | | | |
| Page _ | 2 | of | 4 | |

| CONTRIBUTOR'S FULL NAME AND | TYPE OF CONTRIBUTION | COLUMN A | COLUMN B | DATE RECEIVED (mm/dd/yy) |
|--|--------------------------------|-----------------|--------------|---------------------------------------|
| FULL MAILING ADDRESS | OR OTHER RECEIPT | AMOUNT THIS | CUMULATIVE | RECEIVED BY |
| (street, number, city, state, ZIP code) 1. Contend Communications & Development, LLC | Contributions: | PERIOD | YEAR-TO-DATE | NEGENTE O |
| 109 Lakeview Drive | Direct | | | 04/20/2022 |
| Salem, IN 47167 | in-Kind (describe) | | | 01/20/2022 |
| | Press Release | \$350.00 | \$350.00 | |
| , | Other Receipts: | 4 000.00 | V | |
| • | ☐ Interest ☐ Loan | | | ' Monulaka |
| | Miscellaneous (specify) | | | Mary Lake |
| | · | | | |
| 2. | Contributions: | | | |
| | Direct | | | |
| | In-Kind (describe) | | - | |
| | , | | | |
| ' | Other Receipts: Interest Loan | | | |
| | Miscellaneous (specify) | | | |
| · | missonariosas joposity, | | | |
| | Cantilladiana | | | |
| 3 | Contributions: | | | |
| | tn-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: | | | |
| 1 | Miscellaneous (specify) | | | |
| | - Impositor road (about)) | | | |
| | | 4 | | |
| | THIS PAGE OF SCHEDULE A | \$ 350.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE | | \$ 350.00 | | |
| (Enter total on ITEN | 1 15a of the Summary Sheet.) | 330.00 | | |



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 | | | | | | |
|-------------|---|----|---|---|--|--|
| | | 7 | | | | |
| Page_ | 3 | of | 4 | _ | | |

| RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code) | RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable) | TYPE OF EXPENDITURE and PURPOSE (be specific) | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE OF EXPENDITURE (mm/dd/yy) | |
|--|--|---|-----------------------------------|--|--------------------------------------|--|
| Code A Contend Communications & Development, LLC 109 Lakeview Drive Salem, IN 47167 | Advertising Consultant | Direct M In-Kind Payment of Debt Returned Contribution Other Purpose: Press Release | \$350.00 | \$350.00 | 01 <i>/20/</i> 2022 | |
| Code | , . | Direct tn-Kind Payment of Debt Returned Contribution Other Purpose: | | | | |
| Code | | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: | - | | | |
| Code | | Direct th-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 bn-Kind Payment of Debt Returned Contribution Other Purpose: | | | | |
| | SUBTOTAL THIS PAGE | GE OF SCHEDULE B | \$ 350.00 | | | |
| TOTAL OF ALL PA | TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.) | | | | | |



(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 emounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

| FILE NUMBER | | | | | |
|-------------|---|----|---|--|--|
| | | | | | |
| Page _ | 4 | of | 4 | | |

| | | | 3 | | | |
|---|--|------------------------|-------------------------------------|------------------------------------|---------------------------------------|--|
| CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code) | ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (If any) (street, number, city, state, ZIP code) | AMOUNT NATURE OF DEBT | DATE DEST INCURRED (mm/dd/yy) | CUMULATIVE PAID YEAR-TO-DATE | OUTSTANDING BALANCE THIS PERIOD | |
| Mary Lake 4968 N. Hunters Glen LaPorte, IN 46350 | | \$7,500.00 | 10/3/2018 | \$0.00 | \$5,111.60 | |
| LENDER'S OCCUPATION: Attorney | · | Original Loan | 10,0,2010 | Ψ0.00 | V 0,1111.00 | |
| Mary Lake 4968 N. Hunters Glen LaPorte, IN 46350 | | \$2,000.00 | 09/15/2021 | \$0.00 | \$2,000.00 | |
| LENDER'S OCCUPATION: Attorney | | Fundraiser Loan | | | | |
| | | | | | | |
| LENDER'S OCCUPATION: | | | | | | |
| | | | | | | |
| LENDER'S OCCUPATION: | | | | | | |
| | | | | | | |
| LENDER'S OCCUPATION: | | | · · | | | |
| | | | | | | |
| LENDER'S OCCUPATION: | | | | | | |
| | | | | | | |
| LENDER'S OCCUPATION: | LENDER'S OCCUPATION: SUBTOTAL THIS PAGE OF SCHEDULE D | | | | | |
| TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.) | | | | | | |



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.

| P | | | | | | | | | | FILE NUMBER |
|---|-----------------------|---------------------------|--------------|---------------|-----------|-----------|------------|------------------------|---------------------|--|
| 1. IS THIS AN AMENDME | | | | | | | | | | 46-22-17 |
| SECTION A. CANDID | DATE INFO | RMATION: F | ill In a | l applid | able | box | es as | fully and | accur | ately as possible. |
| | l l | | | | vame | | | lickname | | 3. Type of Committee (Check on Candidate's Principal Committee |
| Lake | | John | | F | | | | | | ☐ Exploratory Committee |
| I. Mailing Address (number and str | | IZIP code) | | | 5. FA | X (Opti | onal) | | | il Address (Optional) |
| 4968 N. Hunters Glen | | | | | (|) | | | lake | law101@hotmail.com |
| 7. City | State | ZIP Code | | unty | | | | hone (Day) | | 10. Telephone (Evening) |
| LaPorte | 114 | 46350 | Lai | orte | | | . , | 874-414 | | (219 ₎ 874-4140 |
| 1. Party Affiliation ☑ Democratic ☐ Libertarian ☐ | Republican F | T∩ther | | 12.0 Pr | Office \$ | Sought | (include | district numb | er, if any. | Not required for an exploratory committee ounty, 32nd Judicial Circuit |
| ECTION B. COMMIT | | | ill in al | Lannlie | eshla | box | ALLUITI | ey or Lar fully and | Onte C | dunty, 32nd Judicial Circuit |
| 3. Full Name of Committee (Do | not abbreviate. | Check if this | is a new n | ame. | anie | DUX | es as . | iuny and | accur | ately as possible. |
| Committee to Elect Jo | hn Lake Pi | osecutor | | | | | | | | |
| 4. Malling Address (number and st | reet, city, state, an | d ZIP code) D Chec | k if this is | a new add | iress. | 15. FA) | X (Option | nal) | 16. E-m | ail Address (Optional) |
| P.O. Box 9216 | | | | | | , , | ١. | • | | |
| 7. City | State | ZIP Code | 18. C | ounty | | 7 | 19. Telej | phone | <u> </u> | 20. Committee Organization Date |
| Michigan City | IN | 46361 | LaF | orte | | - 1, | ,219 | 874-4140 |) | (mm/dd/yy) 02/18/18 |
| . Chairperson's Full Name | Designate C | andidate as Chairper | son. 🗹 | Check if | this is a | | | | | |
| Maria H. Lake | | | • | | | | · | | | |
| . Mailing Address (number and str | eet, city, stale, and | ZIP code) | k if this Is | a new add | ress. | 23. FAX | (Option | a/) | 24. E-m | all Address (Optional) |
| 4968 N. Hunters Glen | | | | | 1, | | , | , | | |
| . City | State | ZiP Code | 26. Co | ounty | 11 | 7 | 27. Telep | hone (Day) | l | 28. Telephone (Evening) |
| LaPorte | · IN | 46350 | LaP | orte | | , | 219 | 448-1208 | 3 | ,219, 448-1208 |
| . Bank or Other Depositories (| ist all banks or | other depositories in | which the | committe | e depo | sits fund | ds, holds | accounts, rei | nts safety | deposit boxes or maintains funds.) |
| 1st Source Bank | | | | | | | | | | • |
| . Exploratory Committee (Give b | nef statement expl | aining purpose of an expl | oratory com | mittee only.) | 31, S | alaries | and Rei | imbursement | ts (Will th | e committee pay the candidate a salary of |
| | | _ | | | | ourseme | ent for lo | st wages? If Y | es, attac | h a copy of the contract.) Yes N |
| ECTION C. APPOINT | MENT OF | TREASURER | (IC 3- | 9-1-14) | | | | | | |
| . I, as Chairperson of mmittee, appoint the follo | the fore | poing Person App | ointed Tr | easurer | | | | Signature | of the Co | emmittee Chairperson |
| easurer of the Committee. | wing perso | as | | | | | | | | |
| . Tressurer's Full Name 🔲 🛭 | esignate candi | date as treasurer. | ☐ Check | (if this is a | new tr | easurer | 7. | • | - | |
| | | | | | | | | | | |
| Mailing Address (number and stre | et, city, state, and | ZIP code) | if this is a | new addr | ess. 3 | 5. FAX | (Options | 9() | 36. E-ma | il Address (Optional) |
| | | | | | ı |) | | | | |
| City | State | ZIP Code | 38. Co | unty | | 3 | 9. Telep | hone (Day) | | 40. Telephone (Evening) |
| | | | | | | - la |) | | | f) |
| ECTION D. ACCEPTA | ANCE OF | APPOINTMEN | T (IC 3 | 3-9-1-15 | 5) | | | | | |
| . I give notice that I acce | ept the duti | es and responsi | bilities | of Treas | urer | of this | s Signa | ature of Per | rson Ac | cepting Appointment |
| mmittee. I am not the ci | nairperson c | of a campaign file. | nance c | ommitte | e (exc | ept a | s | | | · |
| CTION E. CERTIFIC | | | | | | | | | | FOR OFFICE USE ONLY |
| certify as the candidate | and the d | uly appointed C | hairpers | on of t | te Co | mmitt | ee and | that we | have | FILED |
| imined this statement. To t | <u>he best of o</u> | ır knowledge and | i belief i | t is true, | corre | ct and | comple | ete. | | IN CLERKS OFFICE |
| Typed or Printed Name of | Chairperson | Signature of | Chairpe | erson | _ | | Da | te (mm/dd/yy) | | |
| Maria H. Lake | | MAM | v Az | THO | L | | 1 | 1/01/2 | 12 | 050 0 - 000 |
| Typed or Printed Name of | Candidate | Signature/of | Candid | ate | | | Da | te (mm/dd/yy)/ | 1 | SEP 3 0 2022 |
| John F. Lake | | 1 LHIV | VI | nn | ~ | | 1 | 9/01/2 | b 🗀 | |
| rning: State law requires that | any change in | this information be re | eported w | Ithin ten | (10) d= | vs of th | | 10000 | | L/Laone Stevens |
| son who knowingly files a fraudu | ilent report con | minitsa Lével 6 Dife | onv (IC 3 | 3-14-1-13). | A pers | son who | o fails to | file a comple | ate ori | ERK OF LA PORTE CIRCUIT COURT |
| curate report as required by the lipiect to civil penalties (IC 3-9-4-16) | | | mmits a | Class B m | isdeme | anor (I | C 3-14- | 1-14), and ma | a) bo C | ERR OF BATORIE CIRCON COLON |



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 V No

(CFA-4) Summary Sheet

FILE NUMBER

40-22-17

TOTAL PAGES IN ENTIRE CFA-4 REPORT

15

| COMMITTEE INFORMATION | | | |
|---|--------------------------|--|--------------------------|
| 1. Full Name of Committee (as on <i>Statement of Organization</i>) Check if this is a new name of Committee to Elect John Lake Prosecutor | ame. | | |
| 2, Acronym or Abbreviated Name (if any) | | e Telephone Number) 874-4140 | |
| 4. Malling Address (Address where all campaign finance correspondence is received.) CI | heck if this is | a new address. | |
| 5. City, State, ZIP Code Michigan City, IN 46361 | 6. Party Affi Democra | liation <i>(if applicable)</i> atic | |
| CANDIDATE INFORMATION (For Candidate's Co | mmittees | Only) | |
| 7. Full Name of Candidate (Include any nickname.) John Lake | 8. Party Affi Democr | liation or If Independent (atic | Candidate |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.) Prosecuting Attorney of LaPorte County, 32nd Judicial Circuit | 10. County LaPorte | of Residence | |
| TYPE OF REPORT | | CONVENTION | CANDIDATES ONLY |
| 11. Check one: Pre-Primary Pre-Election Annual Nomination Other | | Check one: Pre-Conver | , |
| Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend States | ment of Organizat | ion.) Dost-Conve | ention |
| 12. Reporting Period (mm/dd/yy): From: 04/09/2022 Through: 10/14/2022 | | COLUMN A This Period | COLUMN B Year to Date |
| 13. Cash on hand and investments at the beginning of this reporting period. | | 9,823.00 | |
| 14. Cash on hand and investments January 1, current year. | | | 9,823.00 |
| CONTRIBUTIONS AND RECEIPTS | | | |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) | | 42.700.00 | 12 550 00 |
| 15a. Itemized (Use Schedule A.) | | 12,200.00 | 12,550.00 430.00 |
| 15b. Unitemized | 074 | 12,630.00 | 12,980.00 |
| 15c. Add lines 15a and 15b in both columns. | | 22,453.00 | 22.803.00 |
| 10. And miles 10 and 130 an Odditin A and miles 11 and 100 miles | OTAL | 22,433.00 | 22,000.00 |
| EXPENDITURES | | | |
| (Note: These amounts include in-kind expenditures and loan repayments.) | | 10,083.89 | 10,433.89 |
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) | | 402.92 | 402.92 |
| 17b. Unitemized | TOTAL | 10,486.81 | 10,836,81 |
| 17C. Add lifes 17a and 17b in both columns. | TOTAL | 11,966.19 | 11,966,19 |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) | ININE | 12,111.60 | ,000.70 |
| 19. Debts OWED BY the committee (Use Schedule D.) | | 0.00 | |
| 20. Debts OWED TO the committee (Use Schedule E.) | | 0.00 | |
| CERTIFICATION | | FO | R OFFICE USE ONLY |

| 20. Debts OWED 10 the committee (Use Schedule E.) | | |
|--|---|-----------------------------|
| CERTIFICATION | | FOR OFFICE USE ONLY |
| I CERTIEX THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, | , CORRECT AND COMPLETE. | F I L E D |
| Single role Treasurer Title | Date (mm/dd/yy) | IN CLERKS OFFICE |
| Treasurer | 10/20/22 Date (mm/dd/yy) | 1 |
| Signature of Candidate (if applicable) | 10/20/2023 | OCT 2 1 2022 |
| WARNING: Any information contained in this report abytet be copied for sale or used for any commercial purpose. (IC 3 | 3-9-4-5/ A person who knowingly | Ì |
| files a fraudulent report commits a Level 6 feony (IC 3-14-1-13) A person who fails to file a complete or accurate re Campaign Finance Law commits a Class B prisdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, | eport as required by the indiana 5, IC 3-9-4-17, IC 3-9-4-18 | Lleanne turns |
| Company 11 minute care comminue a crisco o gracos and a 11 years and a crisco o gracos and a 11 years and a crisco of the crisco | | ERK OF LA FORTE CIRCUIT CO! |



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 | | | | | | |
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| | | | | | | |
| Page | 1 | of | 5 | | | |

| 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.} Mark Yagelski 125 Boyd Circle Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| 2. Wesley and Donnita Scully 508 Pinetree Drive Michigan City, IN 46360 | Contributions: Direct tn-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| 3. Robert and Judith Devetski 51285 Shannon Brook Court Granger, IN 46530 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| Anthony Hendricks 306 Decatur Street Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| 5. Austin Tarpley 5418 W. 150 North LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (If required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$400.00 | \$400.00 | 9/9/22 |
| | THIS PAGE OF SCHEDULE A | \$ 800.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE | \$ | | | |



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 | | | | | |
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| Page | 2 | of | 5 | | |

| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS | COLUMN B CUMULATIVE | DATE RECEIVED (mm/dd/yy) RECEIVED BY |
|---|---|-------------------------|------------------------|--|
| (street, number, city, state, ZIP code) 1. Robert and Loretta Lake 613 Franklin Street Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | PERIOD | YEAR-TO-DATE | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (spacity) | \$250.00 | \$250.00 | 9/9/22 |
| ² Carla and Robert Neary 2316 Hazelline Drive Long Beach, IN 46360 | Contributions; Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (# required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| 3 Mark Baker 4783 West Sangria Drive LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: | \$100.00 | \$100.00 | 9/9/22 |
| 4. Anthony Novak 916 Lincolnway LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| 5. Todd Connor 3634 N 700 W LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (# required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| | THIS PAGE OF SCHEDULE A | \$ 650.00 | | |
| 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

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 ioan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from setas, 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 | NUMB | ER | |
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| Page | 3 | of | 5 | |

| CONTRIBUTOR'S FULL NAME AND OCCUPATION | TYPE OF CONTRIBUTION | COLUMN A | COLUMN B CUMULATIVE | DATE RECEIVED (mm/dd/yy) |
|--|---|---|------------------------|--------------------------|
| FULL MAILING ADDRESS (street, number, city, state, ZIP code) | OR OTHER RECEIPT | AMOUNT THIS PERIOD | YEAR-TO-DATE | RECEIVED BY |
| ^{1.} Barry McDonnell 601 Franklin Square Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$500.00 | \$500.00 | 9/9/22 |
| ² Martin Ulferts 910 Washington Street Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| 3. Martha Maust and Larry Brown 3005 Loma Portal Way Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | Mory Lake and Marta Lake |
| Contributor's Occupation (# required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$350.00 | \$350.00 | 6/29/22 and 9/9/22 |
| ⁴ Kristina Jacobucci 916 Lincolnway LaPorte, IN 46350 | Contributions: Direct In-Kind (dascribe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | * \$100.00 ********************************* | \$100.00 | 9/9/22 |
| 5 Nick Otis 916 Lincolnway LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (ii required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| | THIS PAGE OF SCHEDULE A | \$ 1,150.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE) | A ON THE LAST PAGE ONLY V 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 | NUMBE | R | |
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| | | | | |
| Page | 4 | of | 5 | |

| 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.} Johnny Stimley 3205 Tilden Michigan City, IN 46360 | Contributions: Direct n-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: | \$100.00 | \$100.00 | 9/9/22 |
| ² Scott Pejic 1000 Washington Street Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$400.00 | \$400.00 | 9/9/22 |
| ³ Carol and John McDaniel 10088 East SR 4 Walkerton, IN 46574 | Contributions: Direct In-Kind (describe) | | - | Mary Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 8/31/22 |
| ⁴ Vidya Kora 105 Woodslde Drive Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | 4 | . | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| ^{5.} Paul Steury P.O. Box 506 Goshen, IN 46527 | Contributions: Direct In-Kind (describe) | | | Mary Lake |
| Contributor's Occupation (# required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 8/17/22 |
| SUBTOTAL 1 | THIS PAGE OF SCHEDULE A | \$ 800.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM | ON THE LAST PAGE ONLY 15a of the Summary Sheet.) | \$ | | |



State Form 4606 (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 been 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 | | | | |
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| Page | 5 | of | 5 | |

| 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.} Anthony McClintock 4177 Cindy Lane Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Maria Lake 9/9/22 |
| 2. Derrick Deck 1017 Indiana Ave LaPorte, IN 46350 | Centributions: Direct In-Kind (describe) | | | Maria Lake |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| Contributor's Occupation (if required) 1 Heiga Lake-Mark 2592 Bruce Drive Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | Mary Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$500.00 | \$500.00 | 8/15/22 |
| 4. Sean Fitzpatrick P.O. Box 9688 Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| 5. Jason and Lisa Harlow 2083 S. Emmas Lane LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | Maria Lake |
| Contributor's Occupation (if required) | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | 9/9/22 |
| | THIS PAGE OF SCHEDULE A | \$ 900.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEN | 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)

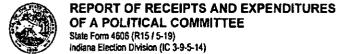
(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

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 lotated on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be Itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be Itemized on this schedule (over \$200 if regular party committee).

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| CONTRIBUTOR'S FULL NAME AND | TYPE OF CONTRIBUTION | COLUMN A | COLUMN B | DATE RECEIVED (mm/dd/yy) |
|--|---|--------------------|----------------------------|--------------------------|
| FULL MAILING ADDRESS (street, number, city, state, ZIP code) | OR OTHER RECEIPT | AMOUNT THIS PERIOD | CUMULATIVE YEAR-TO-DATE | RECEIVED BY |
| 1. Konrady Plastics, Inc. 1780 Coppes Ct. Portage, IN 46368 | Contributions: Direct In-Kind (describe) | \$500.00 | \$500.00 | 6/12/22 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$500.00 | \$500.00 | Mary Lake |
| Root Funeral Home, Inc. 312 E. 7th Street Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | \$500.00 | \$500.00 | 9/9/22 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$500.00 | \$500.00 | Maria Lake |
| Michiana Insurance, Inc. 5385 Johnson Road Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | 9/9/22 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$500.00 | \$500.00 | Maria Lake |
| 4. | Contributions: Direct In-Kind (describe) | | | |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | | |
| 5. | Contributions: Direct In-Kind (describe) | | | |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | | · |
| SUBTOTAL | THIS PAGE OF SCHEDULE A | \$ 1,500.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE | A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.) | S | | |



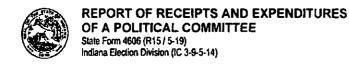
(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

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

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| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS | TYPE OF CONTRIBUTION | COLUMN A | COLUMN B | DATE RECEIVED (mm/dd/yy) |
|--|---|--------------------|----------------------------|--------------------------|
| (street, number, city, state, ZIP code) | OR OTHER RECEIPT | AMOUNT THIS PERIOD | CUMULATIVE YEAR-TO-DATE | RECEIVED BY |
| Laborers Local 81 Political Fund 3502 Enterprise Ave. Valparaiso, IN 46383 | Contributions: Direct In-Kind (describe) | \$100.00 | \$100.00 | 9/9/22 |
| | Other Receipts; Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Maria Lake |
| IN KY OH Regional Council of Carpenters Indiana COPE 771 Greenwood Springs Drive | Contributions: Direct In-Kind (describe) | \$2.500.00 | ¢2.500.00 | 9/ |
| Greenwood, IN 46143 | Other Receipts: Interest Loan Miscellaneous (specify) | \$2,500.00 | \$2,500.00 | Maria Lake |
| 3. | Contributions: Direct In-Kind (describe) | , | | : |
| , | Other Receipts: Interest Loan Miscellaneous (specify) | | | |
| 4. | Contributions: Direct In-Kind (describe) | | | |
| | Other Receipts: interest ioan Miscellaneous (specify) | | | |
| 5. | Contributions: Direct In-Kind (describe) | | | |
| · . | Other Receipts: Interest Loan Miscellaneous (specify) | | | |
| SUBTOTAL | THIS PAGE OF SCHEDULE A | \$ 2,600.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A | A ON THE LAST PAGE ONLY 1 15a of the Summary Sheet.) | \$ | | |



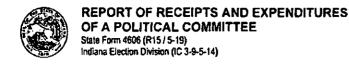
(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

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

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| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (atreat number eith state 7/8 ands) | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED (nim/dd/yy) RECEIVED BY |
|---|---|---|--|--|
| (street, number, city, state, ZIP code) 1. Committee to Elect Sheila Marie Matias 1400 Lakeshore Drive Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | 9/9/22 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Maria Lake |
| ² Kellems for Council 159 Regency Parkway LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | 9/9/22 |
| · | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Maria Lake |
| Hynek for Sheriff 3028 N. Sandridge Road LaPorte, IN 46350 | Centributions: Direct In-Kind (describe) | | ##00.00 | 9/9/22 |
| · | Other Receipts: Interest Loan Miscellaneous (specify) | \$500.00 | \$500.00 | Maria Lake |
| 4. LaPorte County Democratic Civic Club P.O. Box 183 LaPorte, IN 46352 | Contributions: Direct In-Kind (describe) | • | 24 500 00 | 8/14/22 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$1,500.00 | \$1,500.00 | Mary Lake |
| 5 Angle for Mayor 126 Lady Lane Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | 9/9/22 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 \$100.00 | | Maria Lake |
| SUBTOT | AL THIS PAGE OF SCHEDULE A | \$ 2,300.00 | | |
| TOTAL OF ALL PAGES OF SCHEDU | LE A ON THE LAST PAGE ONLY | \$ | | |



(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).

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| Page _ | 2 | of | 2 | |

| 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. House Rep. Pat Boy 218 Southwood Ave. Michigan City, IN 46360 | Contributions: Direct In-Kind (describe) | | | 9/9/22 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$100.00 | \$100.00 | Maria Lake |
| Lynn Spevak for Council 1001 Roberts LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | | | 9/9/22 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | \$ 100.00 | \$100 .00 | Maria Lake |
| 3. | Contributions: Direct In-Kind (describe) | | | |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | | |
| 4. | Contributions: Direct In-Kind (describe) | | | |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | | |
| 5. | Contributions: Direct In-Kind (describe) | | | |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | | |
| SUBTOTAL | THIS PAGE OF SCHEDULE A | \$ 200.00 | | |
| 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-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 INDIMIDUALS 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 <u>lotated on ITEM 15a</u> 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 seles, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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| CONTRIBUTOR'S FULL NAME AND | TYPE OF CONTRIBUTION | COLUMN A | COLUMN B | DATE RECEIVED (mm/dd/yy) |
|---|--|--------------------|----------------------------|--------------------------|
| FULL MAILING ADDRESS (street, number, city, state, ZiP code) | OR OTHER RECEIPT | AMOUNT THIS PERIOD | CUMULATIVE YEAR-TO-DATE | RECEIVED BY |
| 1. NOA I.T. Solutions, LLC 1108 East Summit Street, Suite B Crown Point, IN 46307 | Contributions: Direct In-Kind (describe) | \$200.00 | \$200.00 | 9/9/22 |
| | Other Receipts: interest Loan Miscellaneous (specify) | | | Maria Lake |
| Vouga, Barnes & Denny LLC 6534 American Way Portage, IN 46368 | Contributions: Direct In-Kind (describe) | \$500.00 | \$500.00 | 9/12/22 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | , | • | Maria Lake |
| ¹ Friedman & Associates 705 Lincolnway LaPorte, IN 46350 | Contributions: Direct In-Kind (describe) | \$400.00 | \$400.00 | 9/9/22 |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | | Maria Lake |
| " WILDWOOD LLC 1150 WEST ST. | Contributions: Direct In-Kind (describe) Other Receipts: | \$200.00 | \$ 200.00 | 9/28/22 MARIA LAKE |
| VALPARAISO, IN 46385 | Interest Loan Miscellaneous (specify) | | | MARIA LAKE |
| 5. | Contributions: Direct tn-Kind (describe) | | | |
| | Other Receipts: Interest Loan Miscellaneous (specify) | | | |
| SUBTOTAL | THIS PAGE OF SCHEDULE A | \$ 1,300.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE) | A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.) | \$ 12,200.00 | | |



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 cumutative 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 _ | 1 | _ of _ | 3 | | |

| RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code) | RECIPIENT'S OCCUPATION | TYPE OF EXPENDITURE | COLUMN A | COLUMN B | DATE OF |
|---|---|--|-----------------------|----------------------------|---------------------------|
| | OFFICE SOUGHT (if applicable) | and PURPOSE (be specific) | AMOUNT THIS PERIOD | CUMULATIVE YEAR-TO-DATE | EXPENDITURE (mm/dd/yy) |
| Bethany Lutheran Church (Red, Wine and Brew) 102 G Street LaPorte, IN 46350 | Charitable Organization | Direct in-Kind Payment of Debt Returned Contribution Other Purpose: Sponsorship | \$2,500.00 | \$2,500.00 | 6/20/22 |
| Legacy Hills Golf Course 299 W Johnson Road LaPorte, IN 46350 | Golf Course | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Fundraiser | \$1,487.00 | \$1,487.00 | 9/9/22 |
| MagnetsontheCheap.com 11550 Stonehollow Dr. Ste 160 Austin, TX 78758 | Retailer | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Magnets | \$687.58 | \$687.58 | 6/26/22 |
| Shirtwell 10045 Scott Circle Omaha, NE 68122 | Retailer | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Shirts | \$1,085.81 | \$1,085.81 | 6/23/22 |
| Code A SignRocket.com 340 Broadway Ave. St. Paul Park, MN 55071 | Retailer | ☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Signs | \$2,175.00 | \$2,175.00 | 9/23/22 |
| Code F Kroger 55 Pine Lake Shop Ctr. LaPorte, IN 46350 | Retailer | ☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Prizes | \$120.00 | \$12 0.00 | 9/9/22 |
| Code F Costco Wholesale 625 E. University Dr. Granger, IN 46350 | Retailer | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: FOOD | \$1 55.13 | \$155.13 | 9/7/22 |
| | SUBTOTAL THIS PAGE | | \$ 8,210.52 | | |
| TOTAL OF ALL P | AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of) | | \$ | | |



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 _ | 2 | _ of | 3 | _ | | |

| RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code) | RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable) | TYPE OF EXPENDITURE and PURPOSE (be specific) | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE OF EXPENDITURE (mm/dd/yy) |
|--|--|---|-----------------------------------|--|--------------------------------------|
| Code F Walmart 333 Boyd Blvd. LaPorte, IN 46350 | Retailer | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Food & prizes | \$244.15 | \$244.15 | 9/7/22 |
| Reprographic Arts Inc. 2824 E Michigan Blvd Michigan City, IN 46360 | Retailer | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Print Materials | \$98.98 | \$98.98 | 9/19/22 |
| MC High School Athletic Dept. 8466 W. Pahs Road Michigan City, IN 46360 | School | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Hole Sponsor | \$25 0,00 | \$250.00 | 6/24/22 |
| Code A LaPorte, Starke, Pulaski Bldg Trade 1104 6th Street LaPorte, IN 46350 | Union | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Hole Sponsor | \$100.00 | \$100.00 | 7/23/22 |
| Code A Lions Club District 25A Golf Outing 7128 N. 300 West Michigan City, IN 46360 | Service Club | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Golf Outing | \$300.00 | \$300.00 | 7/8/22 |
| Code F Northside BBQ 198 W. McClung Road LaPorte, IN 46350 | Retailer | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: FOOD | \$450.00 | \$450.00 | 9/9/22 |
| New Prairle Diamond Club 5343 N. Cougar Road New Carlisle, IN 46552 | School | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Hole Sponsor | \$100.00 | \$100.00 | 8/7/22 |
| TOTAL OF ALL D | SUBTOTAL THIS PAC AGES OF SCHEDULE B ON THI | | \$ 1,543.13 | | |
| TOTAL OF ALL PA | Enter total on ITEM 17a of t | | \$ | | |



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 <u>totaled on ITEM 17a</u> 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 _ | 3 | _ of | 3 | _ | |

| RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code) | RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable) | TYPE OF EXPENDITURE and PURPOSE (be specific) | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE OF EXPENDITURE (mm/dd/yy) |
|---|--|---|-----------------------------------|--|--------------------------------------|
| Code A Facebook.com 1 Hacker Way Menlo Pk, CA 94025 | Social Media | ☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Advertising | \$330.24 | \$330.24 | 7/2/22 - 10/14/22 |
| Code | | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: | | | |
| Code | | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: | · | | |
| Code | | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: | | | |
| Code | | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: | | | |
| Code | | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: | | | |
| Code | | Direct th-Kind Payment of Debt Returned Contribution Other Purpose: | | | |
| | SUBTOTAL THIS PAG | SE OF SCHEDULE B | \$ 330.24 | | L |
| TOTAL OF ALL PA | GES OF SCHEDULE B ON THE | | \$ 10,083.89 | | |



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. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

| FILE NUMBER | | | | | | |
|-------------|---|----|---|--|--|--|
| | | | | | | |
| Page | 1 | of | 1 | | | |

| CREDITOR'S OR LENDER'S NAME | ENDORSER'S OR VENDOR'S NAME | AMOUNT | DATE DEBT | CUMULATIVE | OUTSTANDING |
|--|--|-----------------|------------------------|------------------------|------------------------|
| AND MAILING ADDRESS (street, number, city, state, ZIP code) | AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code) | NATURE OF DEBT | INCURRED (mm/dd/yy) | PAID YEAR-TO-DATE | BALANCE THIS PERIOD |
| Mary Lake 4968 N. Hunter's Glen LaPorte, IN 46350 | | \$7,500.00 | 10/3/2018 | \$0.00 | \$5,111.60 |
| LENDER'S OCCUPATION: Attorney | | Original Loan | 10/3/2018 | | φ3,111.00 |
| Mary Lake 4968 N. Hunter's Glen LaPorte, IN 46350 | | \$2,000.00 | 09/15/2021 | \$0.00 | \$2,000.00 |
| LENDER'S OCCUPATION: Attorney | | Fundraiser Loan | | | |
| Mary Lake 4968 N. Hunter's Glen LaPorte, IN 46350 | | \$5,000.00 | 08/31/2022 | \$ 0.0 0 | \$5,000.00 |
| LENDERS OCCUPATION Attorney | | Campaign Loan | 00/01/2022 | • | |
| | | | | | |
| LENDER'S OCCUPATION | | | , | | |
| | | | | | |
| LEMBER'S OCCUPATION | | | | | |
| | | | | | |
| LENDER'S OCCUPATION: | | | | ~ | |
| | | | | - | |
| LENDER'S OCCUPATION: | | | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE D | | | | | \$ 12,111.60 |
| TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.) | | | | | \$ 12,111.60 |



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.

(CFA-4) **Summary Sheet**

FILE NUMBER TOTAL PAGES IN ENTIRE CFA-4 REPORT

| IS THIS AN AMENDMENT? | | | | | | |
|--|------------------|---------------------------|---------------|-------------|-----------|--------------------|
| COMMITTEE INFORMATION | | | | | | |
| Full Name of Committee (as on Statement of Organization) Check if this is a new in the committee to Elect John Lake Prosecutor Committee to Elect John Lake Prosecutor | name. | | • | | | |
| 2. Acronym or Abbreviated Name (if any) | ł | • | hone Numb | oer | | |
| | (219 | 9) 874 | -4140 | | | |
| 4. Mailing Address (Address where all campaign finance correspondence is received.) P.O. Box 9216 | Check if thi | is is a new | address. | | • | |
| 5. City, State, ZIP Code | 1 - | | if applicable |) | | |
| Michigan City, IN 46361 | Demo | | | | | |
| CANDIDATE INFORMATION (For Candidate's C | | | | | | _ |
| 7. Full Name of Candidate (Include any nickname.) John Lake | 1 - | Affiliation of ocratic | or If Indepen | ident C | andidate | |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.) Prosecuting Attorney of LaPorte County, 32nd Judicial Circuit | 10. Cou LaPor | inty of Residence inte | dence | | | |
| TYPE OF REPORT | | | CONVEN | TION C | ANDIDATE | SONLY |
| 11. Check one: | | | Check one | 9. | | |
| Pre-Primary ☐ Pre-Election ☑ Annual ☐ Nomination ☐ Other | | | Pre-C | onvent | ion | |
| Final / Disbands Committee (Lines 18, 19, and 20 must be "0".] Utgoing Treasurer (Within ten (10) days amend State | tement of Orga | anizalion.) | Post-0 | Conver | ition | |
| 12. Reporting Period (mm/dd/yy): | | | UMN A | | COLUM | |
| From: 10/15/2022 Through: 12/31/2022 | | This | Period | | Year to I | Date |
| 13. Cash on hand and investments at the beginning of this reporting period. | | | 11,966.1 | 19 | | |
| 14. Cash on hand and investments January 1, current year. | | | | | | 9,823.00 |
| CONTRIBUTIONS AND RECEIPTS | | | | | | |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) | | | 0.000.5 | 10 | | E 042 20 |
| 15a. Itemized (Use Schedule A.) | | | 3,362.2 | | | 5,912.20 440.00 |
| 15b, Uniternized | | | 3,372.2 | | | 6,352.20 |
| | TOTAL | | • | - | | |
| 10.700 | TOTAL | | 15,338.3 | 39 | 2 | 6,175.20 |
| EXPENDITURES | | | | | | |
| (Note: These amounts include in-kind expenditures and loan repayments.) | | | 45.000.0 | | | 5 000 00 |
| 17a, Itemized (Use Schedule B.) (Public Question: use Schedule C.) | | | 15,266.0 | | | 5,699.90 |
| 17b. Unitemized | | | 72.3 | | | 475.30 |
| 17c. Add lines 17a and 17b in both columns. | TOTAL | | 15,338.3 | | | 6,175.20 |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) | TOTAL | | 0.0 | _ | | 0.00 |
| 19. Debts OWED BY the committee (Use Schedule D.) | | | 0.0 | | | |
| 20. Debts OWED TO the committee (Use Schedule E.) | | _ | 0,0 | 00 | | |
| CERTIFICATION | | | | FOR | OFFICE US | E ONLY |
| I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS T | TRUE, CORF | RECT AND CO | WELFIELD | RKS (| OFFICE | , |
| Title Treasurer | C | vate /mm/pc | 23 | 17 | 2023 | |
| Signature of Candidate (if applicable) | D | ate (mm/dd | 1/y) JAIT | , , | בטבט | |

WARNING: Any information contained in this report may not be copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose. (IC 3-9-4-5) A berson who knowingly one of the copied for sale or level for any commercial purpose.



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 | 1 | of | 1 | | |

| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS | TYPE OF CONTRIBUTION | COLUMN A | COLUMN B | DATE RECEIVED (mm/dd/yy) |
|---|-------------------------------------|--|--------------|--------------------------|
| (street, number, city, state, ZiP code) | OR OTHER RECEIPT | AMOUNT THIS PERIOD | YEAR-TO-DATE | RECEIVED BY |
| 1. Barry McDonnell | Contributions: | | | |
| 601 Franklin Square | Direct | | | |
| Michigan City, IN 46360 | In-Kind (describe) | | | Maria Lake |
| · | | 0500.00 | 44 000 00 | |
| | Other Receipts: | \$500.00 | \$1,000.00 | |
| | Miscellaneous (specify) | | | 11/7/22 |
| | - Maddand (Opposity) | | | 1111122 |
| Contributor's Occupation (if required) Attorney | | ·/ • • • • • • • • • • • • • • • • • • • | <u> </u> | |
| 2. Jeffrey Stesiak | Contributions: Direct | | | |
| 53600 N Ironwood Road South Bend, IN 46635 | in-Kind (describe) | | | Maria Lake |
| Sodili Berid, 114 40055 | , , , , , , , , , , , , , , , , , , | | | |
| | Other Receipts: | \$250.00 | \$250.00 | |
| | Interest Loan | | | |
| | Miscellaneous (specify) | | | 11/2/22 |
| Contributor's Occupation (if required) | · | | | |
| 3. Andrew S. Kubik | Contributions: | | | |
| 2740 Floral Tri | Direct | | | |
| Long Beach, IN 46360 | In-Kind (describe) | | | Maria Lake |
| | | 4000.00 | #000.00 | |
| | Other Receipts: Interest Loan | \$200.00 | \$200.00 | |
| | Miscellaneous (specify) | | | 11/7/22 |
| | | | | 1117/22 |
| Contributor's Occupation (if required) | | | | |
| 4.Mary Lake 4968 N. Hunters Glen | Contributions: | | | |
| LaPorte, IN 46350 | In-Kind (describe) | | | Maria Lake |
| Lat Site, in 4000 | | | | |
| | Other Receipts: | \$2,412.20 | \$2,412.20 | |
| | Interest Loan | | | |
| | Miscellaneous (specify) | | | 12/27/22 |
| Contributor's Occupation (if required) Attorney | Loan Forgiveness | | | |
| 5. | Contributions: | | | |
| | Direct | | | |
| | In-Kind (describe) | | | |
| | Other Receipts: | | | |
| | Interest Loan | | | |
| | Miscellaneous (specify) | | | |
| Contributor's Occupation (if required) | | | | |
| | THIS PAGE OF SCHEDULE A | \$ 3,362.20 | | |
| TOTAL OF ALL PAGES OF SCHEDULE | | | | |
| | 1 15a of the Summary Sheet.) | \$ 3,362.20 | | |



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 _ | 1 | _ of | 1 | | |

| RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZiP code) | RECIPIENT'S OCCUPATION | TYPE OF EXPENDITURE | COLUMN A AMOUNT THIS | COLUMN B CUMULATIVE | DATE OF EXPENDITURE |
|---|-------------------------------|---|-------------------------|------------------------|------------------------|
| (0.000, 0.00, | OFFICE SOUGHT (if applicable) | PURPOSE (be specific) | PERIOD | YEAR-TO-DATE | (mm/dd/yy) |
| Code A WEFM 1903 Springland Ave. Michigan City, IN 46360 | Radio | Direct th-Kind Payment of Debt Returned Contribution Other Purpose: | \$670.00 | \$670.00 | 10/27/22 |
| | | Advertising | | | |
| Code A WIMS 685 East 1675 North Michigan City, IN 46360 | Radio | Direct In-Kind Payment of Debt Returned Contribution Other Purpose: | \$720.00 | \$720.00 | 10/27/22 |
| | | Advertising | | <u> </u> | <u> </u> |
| Code O John F. Lake, Jr. 417 Bristol Rd | Web Design | Direct In-Kind Payment of Debt Returned Contribution Other | \$1,000.00 | \$1,000.00 | 11/7/22 |
| Augusta, GA 30907 | | Purpose: Web Page | | | |
| Code A Meta Platforms, inc. Facebook.com | Social Media | Direct In-Kind Payment of Debt Returned Contribution Other | \$378.44 | \$708.68 | 10/29-11/9/22 |
| 1 Hacker Way Menlo Pk, CA 94025 | | Purpose: Advertising | | | |
| Code O Menards 5260 Franklin Street | Retail Store | Direct In-Kind Payment of Debt Returned Contribution | \$385.97 | \$385.97 | 10/17/22 |
| Michigan City, IN 46360 | | Purpose: Equipment | \$303.97 | \$303.97 | 10/11/22 |
| Code O Mary Lake | Attorney | Direct In-Kind Payment of Debt Returned Contribution | \$0.500.40 | \$9,699.40 | 12/27/22 |
| 4968 N Hunters Glen LaPorte, IN 46350 | | Other Purpose: Repay Loans | \$9,699.40 | фэ,0ээ.40 | 12/2/122 |
| Code O Mary Lake 4968 N Hunters Glen | Attorney | Direct In-Kind Payment of Debt Returned Contribution Other | \$2,412.20 | \$2,412.20 | 12/27/22 |
| LaPorte, IN 46350 | | Purpose: Loan Forgiveness | | | |
| | SUBTOTAL THIS PAGE | GE OF SCHEDULE B | \$ 15,266.01 | | |
| TOTAL OF ALL P | AGES OF SCHEDULE B ON TH | E LAST PAGE ONLY the Summary Sheet.) | \$ 15,266.01 | | |



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, OWEO BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

| FILE NUMBER | | | | | |
|-------------|---|----|---|--|--|
| | | | | | |
| Page _ | 1 | of | 1 | | |

| 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 |
|---|--|---|-------------------------------------|------------------------------------|---------------------------------------|
| Mary Lake 4968 N Hunters Glen LaPorte, IN 46350 | | \$7,500.00 | 10/3/2018 | \$5,111.60 | \$0.00 |
| LENDER'S OCCUPATION: Attorney | · · | Original Loan | ,,,,,,,,,, | ••• | |
| Mary Lake 4968 N Hunters Glen LaPorte, IN 46350 | - | \$2,000.00 | 9/15/21 | \$2,000.00 | \$0.00 |
| LENDER'S OCCUPATION: Attorney | | Fundraiser Loan | | | |
| Mary Lake 4968 N Hunters Glen LaPorte, IN 46350 | | \$5,000.00 | 8/31/22 | \$5,000.00 | \$0.00 |
| LENDER'S OCCUPATION: Attorney | | Campaign Loan | 6/3//22 | | |
| | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| | , | | | | |
| LENDER'S OCCUPATION: | | | | | |
| | TOTAL OF ALL | SUBTOTA PAGES OF SCHEDUL (Enter total on I | E D ON THE LA | | \$ 0.00 \$ 0.00 |