

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

.

State Form 4604 (R15 / 5-19)

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

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

	·									FILE NUMBER
1. IS THIS AN AMENDMENT?	🗹 Yes	S 🗌 No If Yes	s, plea	se enter	' the	file n	umbe	er in this bo	x. →	46-22-23
SECTION A. CANDIDATE	INFO	RMATION: Fil	l in al	l applic	able	e box	es a:	s fully and	accura	ately as possible.
2. Last Name	Fü	rst Name		Middle N	ame			Nickname	_	3. Type of Committee (Check one)
Heeg	F	Ronald		Charle	s					Candidate's Principal Committee
4. Mailing Address (number and street, city,	state, and 2	ZIP code)	<u> </u>	1		AX (Opt	ionali	l <u></u>	6. F-mai	Exploratory Committee Address (Optional)
5161 N. Cameron		-			<u> </u>		<i></i> ,			4sheriff@gmail.com
7. City	State	ZIP Code	8. Co	unty	<u> </u>		9. Tel	ephone (Day)	1 nocg	10. Telephone (Evening)
LaPorte	IN	46350		Porte				608-100	4	,219, 608-1004
11. Party Affiliation	I;	L			fice	Sough				Not required for an exploratory committee
Democratic 📋 Libertarian 🗹 Reput				<u> </u>	епп	ot La	Porte	e County		
SECTION B. COMMITTEE	INFO	RMATION: Fil	l in al	l applic	abl	e box	es a	s fully and	accura	ately as possible.
is. Full Name of Committee (Do not abl	proviate.)	Check if this is	a new r	ame.			•			
The committe to elect Ron										
14. Mailing Address (number and street, diy	, state, and	ZIP code) D Check	if this Is	a new add	ress.	15. FÀ	X (Opt	ional)	16. E-ma	all Address (Optional)
5161 N. Cameron						()		heeg-	4sheriff@gmail.com
17. City	State	ZIP Code		ounty				lephone		20. Committee Organization Date
LaPorte	IN	46350		Porte			1.) ₎ 608-1004	4	(mm/dd/yy) 05/18/2021
	ignate Ce	indidate as Chairpers	on. C	Check if	this is	a new o	chairpe	rson.	······	
Michael Gonder	·									
2. Mailing Address (number and street, oily	state, and	ZIP code) Check	if this is	a new add	ress.	23. FA	X (Opt	ional)	24. E-ma	all Address (Optional)
.114 Bittersweet Tr.						1)			
25. City	State	ZIP Code	1	ounty				lephone (Day)		26. Telephone (Evening)
Michigan City	IN	46360		Porte				9 <mark>) 877-815</mark> 9		
29. Bank or Other Depositories (List all	banks or	other depositories in	which th	e committe	e dep	xosits fui	nds, ho	ids accounts, re	ints safety	deposit boxes or maintains funds.)
First Source Bank										
30. Exploratory Committee (Give brief stat	ement expl	aining purpose of an explo	ratory cor	nmitteo only.)	31.	Salarie	s and	Reimbursemen	its (Will Ih	e committee pay the candidate a salary o
							ingint 10	nusumages/II	185, 808C	h a copy of the contract.)
SECTION C. APPOINTME 32. I, as Chairperson of the		TREASURER	(IC 3	-9-1-14)						
committee, appoint the following	g perso			reasurer				Signature	of the Co	ommittee Chairperson
Freasurer of the Committee.	- •	Deb Varr						1140	NOR	WUDDE
33. Treasurer's Full Namo 🔲 Design Deb Varnak	ete candi	date as treasurer. [_] Che	t if this is a	a uam	treasur	er.			
		740 and 1							<u>, </u>	
34. Mailing Address (number and street, city, 732 Gentry Lane	51819, 8 7 0	21° 0000) 📋 Check	it this is	e new add	nėss,	35, FA	X (Opt	ional)	36. E-ma	all Address (Optional)
7. City	Ctat-	700.0-4-				<u>.</u>)		L	
New Carlisle	State ENI	ZIP Code	38. C	-				lephone (Day)		40. Telephone (Evening)
	IN	46350	1	Joseph			219) <u>363-692</u> 3	5	
SECTION D. ACCEPTANC	EOF	APPOINTMEN	I (IC	3-9-1-1	5)					
11. I give notice that I accept t Committee. I am not the chairp	ne auti erson «	ies and responsi of a campaign fir	pilitiés Nance	of Trea	sure	r of th	nis Sj	gnature of Pe	erson Ac	cepting Appointment
permitted for a candidate committe	<u>ee u</u> ndo	er IC 3-9-1-7).		winnitt	-o (e	rocht	"" / /	INCER	ut s	IL
SECTION E. CERTIFICATI	ON O	F STATEMENT								FOR OFFICE USE ONLY
Ve certify as the candidate and	the d	uly appointed Cl	hairpei	son of	the (Commi	ittee a	and that we	have	
xamined this statement. To the b 2. Typed or Printed Name of Chai	USL OF O	ur knowledge and Signature of	Chair	It is true	cor	rect an			,	I L E IN CLERKS OFFIC
Michael Gonder					6	4)	Date (mm/dd/yy		
	41.4.4	1 OUCA	A	Ne	\mathcal{P}	M S	<u> </u>	01.05		
43. Typed or Printed Name of Can	udate	Signature of	Candi					Date (mm/dd/yy)		JAN 5 2022
_Roanld Heeg		///	-]/	2				1-5-		5 2022
Warning: State law requires that any c	hange in	this information be re	ported	viplin ten	(10)	days of	the ct	напре (/С 3-9-1	-10). A	
accurate report as required by the India	ioo noqei	mmilis a Level 6 D fe alon Finance Law co	lonv (IC	3.14.1.13	ΙΔn	00000	dan fall	a la fila a assa		CLERK OF LA PORTE CIRCUIT
subject to civil penalties (IC 3-9-4-16, IC 3								· · · · · · · · · · · · · · · · · · ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	





CANDIDATE'S STATEMENT OF ORGANIZATION AND

.

DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

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

, 1

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

ŧ

·····									FILE NUMBER
. IS THIS AN AMENDMEN	T? 🗌 Yes	s 🗹 No If Yes,	please	enter	the file n	umbe	r in this box	.→	
ECTION A. CANDIDA									telv as possible.
Last Name		rst Name	In an a	iddle Na	mo		Nickname		3. Type of Committee (Crieck one)
									Candidate's Principal Committee
Heeg	F	Ronald	C	Charles	s				Exploratory Committee
Mailing Address (number and street,	, city, state, and i	ZIP code)			5. FAX (Opt	ional)			Address (Optional)
5161 N. Cameron					()			heeg	4sheriff@gmail.com
. City	State	ZIP Code	8. Count	ty	3		ephone (Day)		10. Tetephone (Evening)
LaPorte	IN	46350	LaPo), 608-100 [,]		(219) 608-1004
1. Party Affiliation			_1	12.0	ffice Sough	t (Inclu	de district numb	er, if any.	Not required for an exploratory committee
Democratic 🗋 Libertarian 🕅 B	Republican] Other					e County		
SECTION B COMMITT	EE INFO	RMATION: Fill	in all a	applica	able box	es a	s fully and	accura	ately as possible.
3. Full Name of Committee (Do no	ot abbreviate.)) 🗹 Check if this is a	a new nam	ne.					
The committee to elect	Ron Heeg	g Sheriff			·				all Address (Optionel)
4. Mailing Address (number and stree	et, city, state, an	d ZIP code) 🔲 Check	if this is a	new addi	ress. 15. FA	X (Op	lional)		
5161 N Cameron			<u>_</u>		<u> </u>)		Ineeg	4sheriff@gmail.com
7. City	State	ZIP Code	18. Cou	nty			elephone		20. Committee Organization Date
LaPorte	IN	46350	LaPo			<u>n – – – – – – – – – – – – – – – – – – –</u>	9 ₎ 608-100	4	(mm/dd/yy) 05/18/2021
1. Chairperson's Full Name	Designate C	andidate as Chairperse	on. 🔲 🤇	Check if t	his is a new	chairp	erson.		
Michael Gonder	-								
". Mailing Address (number and stre	et, city, state, an	nd ZIP code) 🔲 Check	il this is a	new add	ress. 23. F/	AX (Op	tional)	24. E-m	all Address (Optional)
114 Bitterseet Dr.					4	,			
5. City	State	ZIP Code	26. Cou	inty			elephone (Day)		28. Telephone (Evening)
Michigan City	IN	46360	LaPo	orte			9	()	
Reak as Other Departmenter (iet all benks (her denositories in	which the	committe	e deposits fi	unds, I	olds accounts, r	onts safet	y deposit boxes or maintains funds.)
First Source Bank					. ,				
30. Exploratory Committee (Give b	rief statement av	misining ourgoss of an explo	antory comm	nittee only.	31. Selar	es an	Reimburseme	nts (Will (he committee pay the candidate a salary o
To begin to collect money for	r my commi	thee for Sheriff of La	Porte Col	untv	reimburse	nment i	or lost wages? I	l Yes, atta	ch a copy of the contract.) 🔲 Yes 🕑 N
		FTREASURER							
SECTION C. APPOIN 32. 1, as Chairperson of	f the for	egoing Person App	ointed Tro	asurer	/		Signatur	e of the C	committee Chairperson
committee, appoint the foll	owing pers	son as Deb Van					m.	hae	Intot
Treasurer of the Committee.		didate as treasurer.		if this is	a oew inees	iter.		<u>A NE</u>	
	Jesignate can	ICICATO ES D'OBSUTOT.			0.000 0000				
Deb Varnak		ad 7/0 audal	k il this is a	now odr	tress 35. F	AX /0	ptional)	36. E-n	nail Address (Optional)
34. Mailing Address (number and str	BCI, CRY, SIRRO, B			1120 000				Į	
732 Gentry Lane	1.01-1-	ZIP Code	38. Co	11000) 	Telephone (Day)	40. Telephone (Evening)
37. City	State	46552		loseph			9, 363-692		
New Carlisle						(2	b) bbb bb .		
SECTION D. ACCEPT	ANCE O	F APPOINTMEN		3-9-1-1	(5) eeuror of	this	Signature of I	Person	Accepting Appointment
41. I give notice that I acc Committee. I am not the c	cept the di	uttes and response of a campaign fi	inance c	्रा । rë: commiti	esurer of	t as	~ /		
permitted for a candidate co	mmittee un	der IC 3 <u>-9-1-7).</u>					part	<u> </u>	
SECTION E CERTIEL	CATION	OF STATEMEN	T						FOR OFFICE USE ONLY
We contify as the candidat	e and the	duly appointed (Chairpen	son of	the Com	mittee	and that w	e have	FILED
examined this statement. To	the best of	f ou <u>r knowledge an</u>	a peller	त १६ कर्म्	e, correct		Date (mm/dd/		
42. Typed or Printed Name o	or Chairpers		Young						
Michael Gonder		I MM	152	GS	\sim		5.26	21_	MAY 2 6 2021
43. Typed or Printed Name o	f Candidat	e Signature	Candit	tile	7		Date (mm/dd		MIRT CO ZUCI
Ronald Heeg			- 1	\sim			5-26-	2	
and the first the second se	t any channe	in this information be	reported	wjihin 🗶) n (10) days	of the	change (IC 3-9	-1-10). A	Laore Stevers
									CIEPY OF IN POPTE CIPCINT CON
person who knowingly tiles a trau accurate report as required by th subject to civil penalties (IC 3-9-4-	e Indiana Ca	impaign Finance Law	commits a	Class E	s misdemea	nor (IC	J-14-1-14), and	л шау юе	
I sumert to civil penalties (IC 3-9-4-	10, 10, 3-5-9-1	11, BIIU IU 3-3-4-10).							

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R15/5-19) Indiana Election Division (IC 3-9-5-14)		(CF) Summar File NU	ry Sheet
. <i>IUCTIONS:</i> 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.	то		TIRE CFA-4 REPORT
IS THIS AN AMENDMENT? Yes V No			
COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization) Check if this is a new n The Committee to Elect Ron Heeg Sheriff	ame.		٦
2. Acronym or Abbreviated Name (if any)		ttee Telephone Number	
4. Mailing Address (Address where all campaign finance correspondence is received.)) 608-1004 is a new address.	
5. City, State, ZIP Code La Porte, IN 46350	6. Party A Repub	fillation <i>(if applicable)</i>	
CANDIDATE INFORMATION (For Candidate's Co			
7. Full Name of Candidate (Include any nickname.) Ron Heeg		filiation or If Independent	nt Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Sheriff of La Porte County		of Residence	· ·
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Com	rention
Final / Disbands Committee (Lines 18, 19, and 20 must be 10*.) Outgoing Treasurer (Within ten (10) days emend Statem	ment of Organiz	etion.)	vention
1 porting Period (mm/dd/yy): From: 5/18/21 Through: 1/19/22		COLUMN A This Period	COLUMN 8 Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		0.00	
14. Cash on hand and investments January 1, current year.			0.00
CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and ioans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		24.252.50	
15b. Unitemized		24,358.50	24,358.50
15c. Add lines 15a and 15b in both columns. SUBTO		25,508.50	1,150.00
16 Add lines 12 and 15- in Column A and 15- in 14 and 15- in 2 and	OTAL	25,508.50	
EXPENDITURES		20,000.00	25,508.50
(Note: These amounts include in-kind expenditures and loan repayments.)	_		
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		21,578.78	21,578.78
17b. Unitemized		30.45	30.45
17c. Add lines 17a and 17b in both columns. SUBT	OTAL	21,609.23	21,609.23
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	3,899.27	3,899.27
19. Debts OWED BY the committee (Use Schedule D.)		0.00	
20. Debts OWED TO the committee (Use Schedule E.)	<u>+</u>	0.00	
CERTIFICATION			
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRU	UE. CORREC		CAR OFPACE USE ON BE
Signature of Treasurer Debra Varnak Treasurer	1	(mm/dd/yy) 1/19/22	IN CLERKS OFFICE
Si tre of Candidate (if application	Date	(mm/dd/y) 11922	JAN 19-2021 2022

Si the of Candidate (if application	Date (mm/dd/yy)	
WARNING: Any information contained in this report may habbe copied for sale or used for any commercial purpose. (IC 3-9- files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties, (IC 3-9-4-16, IC	t as required by the Indian	y a

CLERK OF LA PORTE CIRCUIT COURT

202 ñS 3



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R15 / 5-19)

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

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

RUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN LACK 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 bast \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE		R	
Page	1	of	7	

FULL MAILING ADDRESS	OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)	· · · · · · · · · · · · · · · · · · ·	PERIOD	YEAR-TO-DATE	RECEIVED BY
^{1.} Ron Heeg 5161 N Cameron La Porte, IN 46350	Contributions: Direct In-Kind (describe)			5/18/21
Contributor's Occupation (if required) Deputy Sheriff	Other Receipts: Interest Loan Miscellaneous (specify)	\$5,000.00	\$5,000.00	D Varnak
^{2.} Ralph & Karen Howes 3487 Waverly Rd La Porte, IN 46350	Contributions: Direct In-Kind (describe)			6/28/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	R Heeg
^{3.} Marilyn Mather 4088 W Erin Dr La Porte, IN 46350	Contributions: Direct in-Kind (describe)	¢4.000.00		6/28/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,000.00	\$1,000.00	R Heeg
⁴ Mitch Feikes 2178 Whispering Blvd La Porte, IN 46350	Contributions: Direct In-Kind (describe)			7/30/21
Contributor's Occupation (il required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	R Heeg
^{5.} Lisa & Michael Pierzakowski 3511 Johnson Rd La Porte, IN 46350	Contributions: Direct In-Kind (describe)			7/30/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	R Heeg
	HIS PAGE OF SCHEDULE A	\$ 6,700.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



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

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

RUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN DLACK 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 152 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	
	<u> </u>			
Page	_2	of	7	

FULL MAILING ADDRESS	TYPE OF CONTRIBUTION , OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)	· · · · · · · · · · · · · · · · · · ·	PERIOD	YEAR-TO-DATE	RECEIVED BY
^{1.} Ronald Schafer 1566 E Glacier Bend La Porte, IN 46350	Contributions: Direct In-Kind (describe)			8/24/21
Contributor's Occupation (If required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	R Heeg
 ² Michael & Gale Gonder 114 Bittersweet Michigan City IN 46360 	Contributions: Direct In-Kind (describe)			8/2/21
Contributor's Occupation (77 required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$133.50	\$133.50	R Heeg
^{3.} Thomas and Martha Swanson 344 Grayson Rd La Porte, IN 46350	Contributions: Direct In-Kind (describe) Other Receipts:	\$150.00	¢450.00	11/5/21
Contributor's Occupation (if required)	Interest Loan Miscellaneous (specify)	\$150.00	\$150.00	R Heeg
 Charles and Patricia Sauers 2111 E 800 N La Porte, IN 46350 	Contributions: Direct In-Kind (describe)			11/5/21
Contributor's Occupation (il required)	Other Receipts: Interest Loan Miscellaneous (specify)	_. \$500.00	\$500.00	R Heeg
 ⁵ Richard Gramarossa 110 May Ave Michigan City, IN 46360 	Contributions: Direct In-Kind (describe) Yard Signs			1/17/21
Contributor's Occupation (if required) Business Owner	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,250.00	\$1,250.00	R Heeg
	HIS PAGE OF SCHEDULE A	\$ 2,533.50		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)			

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

CONTRIDUTORIO

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

RUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN DLACK 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>totaled on ITEM 15a</u> 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	
Page	3	of	7	

FULL MAILING ADDRESS	OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
^{1.} Howard G. Jones 1815 Michigan Ave La Porte, IN 46350	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	R Heeg
² Timothy J. Stabosz 1501 Michigan Ave La Porte, IN 46350	Contributions: Direct (n-Kind (describe)	¢500.00		10/18/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	R Heeg
³ Tom & Jackie Dermody 1658 S Willow Bend La Porte, IN 46350	Contributions: Direct In-Kind (describe)	.		10/18/21
Contributor's Occupation (# required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$150.00	\$150.00	R Heeg
⁴ Allen and Heather Stevens 5277 W 1475 S Hanna, IN 46340	Contributions: Direct In-Kind (describe)	* 450.00		10/18/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$150.00	\$150.00	R Heeg
^{5.} Jaye Fuller 10 Jamestown Dr Michigan City IN 46360	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required) <u>Retired Electrician</u>	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,000.00	\$1,000.00	R Heeg
	HIS PAGE OF SCHEDULE A	\$ 2,050.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	\$			



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

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

RUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print teglibly 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	
Page	4	of	7	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	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.} Frances Milo 92 Keston Elm Dr La Porte IN 46350	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (il required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	R Heeg
^{2.} David Pendergast PO Box 1693 La Porte, IN 46350	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required)	Other Receipts:	\$125.00	\$125.00	R Heeg
^{3.} Timothy and Cile Konowitz 3803 W Small Rd La Porte IN 46350	Contributions: Direct in-Kind (describe)		0 /05 00	10/18/21
Contributor's Occupation (il required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$125.00	\$125.00	R Heeg
 ⁴ Ryan and Sarah Seaburg 11X Edgewood Court La Porte, IN 46350 	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required)	Other Receipts: interest Loan Miscellaneous (specify)	\$250.00	\$250.00	R Heeg
⁵ Paul Fithian 3013 Loma Portal Way Long Beach, IN 46360	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (# required)	Other Receipts:	\$375.00	\$375.00	R Heeg
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 1,125.00		
TOTAL OF ALL PAGES OF SCHEDULE A	A ON THE LAST PAGE ONLY	\$		



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

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

RUCTIONS: 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 <u>totaled on ITEM 15a</u> 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					
	<u> </u>				
Page	5	of	7		

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.} William and Mary Christakes 610 Lakeside Dr La Porte IN 46350	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required)	Other Receipts:	\$500.00	\$500.00	R Heeg
² Timothy and Susan Anderson 2961 Lake Shore Drive Long Beach, IN 46360	Contributions: Direct In-Kind (describe)	A E 000 00		10/18/21
Contributor's Occupation (if required) <u>Retired</u>	Other Receipts: Interest Loan Miscellaneous (specify)	\$5,000.00	\$5,000.00	R Heeg
³ Duane and Bonnie Miller 605 Lakeside St La Porte, IN 46350	Contributions: Direct in-Kind (describe) Other Receipts:	\$125.00	\$125 00	10/18/21
Contributor's Occupation (if required)	Interest Loan Miscellaneous (specify)	\$125.00	\$125.00	R Heeg
⁴ Guy Dimartino 1411 S Woodland, Suite D Michigan City, IN 46360	Contributions: Direct In-Kind (describe)	•		10/18/21
Contributor's Occupation (# required)	Other Receipts; Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	R Heeg
^{s.} Mitchell Feikes 217 Whispering Blvd La Porte, IN 46350	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$500.00	R Heeg
	HIS PAGE OF SCHEDULE A	\$ 6,125.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



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

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

IRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print teglibly IN __ACK 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	6	of	7		

FULL MAILING ADDRESS	; TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A	COLUMN B	DATE RECEIVED
(street. number, city. state. ZIP code)		PERIOD	CUMULATIVE	RECEIVED BY
^{1.} Lisa & Michael Pierzakowski 3511 Johnson Rd La Porte, IN 46350	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required)	Other Receipts:	\$125.00	\$375.00	R Heeg
² llene and Paul Zona 6706 N 300 W Michigan City, IN 46360	Contributions: Direct In-Kind (describe)	0 407.00		10/18/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$125.00	\$125.00	R Heeg
³ Bruce & Penny Melton 2161 N 350 E Rolling Prairie, IN 46371	Contributions: Direct In-Kind (describe) Other Receipts:	\$125.00	\$125.00	10/18/21
Contributor's Occupation (# required)	Interest Loan Miscellaneous (specify)	\$125.00	\$125.00	R Heeg
⁴ Gerard and Karen Vandervelden 5822 W 250 N La Porte, IN 46350	Contributions: Direct In-Kind (describe)	6405.00		10/18/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$125.00	\$100.00	R Heeg
^{5.} Harold and Jane Parker 2602 E St Rd 4 La Porte, IN 46350	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$125.00	\$125.00	R Heeg
	HIS PAGE OF SCHEDULE A	\$ 625.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



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

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

RUCTIONS: 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 <u>totaled on ITEM 15a</u> 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 perty 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	
		_		
Page	7	of	7	

FULL MAILING ADDRESS	OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
^{1.} Thomas and Marilyn Boyd 10104 N Beverly Ln La Porte, IN 46350	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$125.00	\$125.00	R Heeg
² . Kenneth and Rita Layton	Contributions:			
1498 W 500 S La Porte, IN 46350	Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required)	Other Receipts; Interest Loan Miscellanèous (specify)	\$125.00	\$125.00	R Heeg
³ Ron Heeg	Contributions:			
5161 N Camerón La Porte, IN 46350	Direct In-Kind (describe) Yard Signs	* 0.050.00		1/17/21
Contributor's Occupation (# required) Deputy Sheriff	Other Receipts: Interest Loan Miscellaneous (specify)	\$2,950.00	\$7,950.00	D Varnak
⁴ Various cash donations at in-person fundraiser	Contributions: Direct In-Kind (describe)			10/18/21
Contributor's Occupation (if required)	Other Receipts; Interest Loan Miscellaneous (specify)	\$450.00	\$450.00	D Varnak
⁵ Michael and Dorothy Rosenbaum	Contributions:	<u></u>		
1515 Indiana Avenue La Porte, IN 46350	Direct In-Kind (describe)			10/18/21
Contributor's Occupation (# required)	Other Receipts: interest Loan Miscellaneous (specify)	\$125.00	\$125.00	R Heeg
	HIS PAGE OF SCHEDULE A	\$ 3,725.00		
TOTAL OF ALL PAGES OF SCHEDULE		\$ 24,358.50		



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

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

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

	FI		BER	
Page	_1	of	1	

FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
¹ Cutier Funeral Home 2900 Monroe St La Porte, IN 46350	Contributions: Direct In-Kind (describe)			10/18/21
· .	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,000.00	\$1,000.00	R Heeg
 ² Balanced Therapy & Wellness 5271 N Johnson Rd Michigan City, IN 46360 	Contributions: Direct In-Kind (describe)	\$125.00	\$425.00	10/18/21
	Other Receipts:	\$125.00	\$125.00	R Heeg
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts:			
4	Contributions:			
	Other Receipts:			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts:			
	L THIS PAGE OF SCHEDULE A	* 1 105 00		
TOTAL OF ALL PAGES OF SCHEDUL		\$ 1,125.00 \$		



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

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

FILE NUMBER

of____

1

1

Itemized Contributions and Other Receipts

Page

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 entilies OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, If regular party committee). All transfers-in and in-kind contributions receipts, (such as hear 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).

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.} Friends of Jim Pressel 1772 N Lofgren Rd Rolling Prairie, IN 46371	Contributions: Direct In-Kind (describe)	\$150.00	\$150.00	10/18/21
	Other Receipts:			R Heeg
² John T Boyd for Sheriff 10104 N Beverly Ln La Porte, IN 46350	Contributions: Direct In-Kind (describe)	\$150.00	\$150.00	10/18/21
	Other Receipts: Interest Loan Miscellaneous (specify)			R Heeg
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)	Ĩ		
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts:			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts:			
	THIS PAGE OF SCHEDULE A	\$ 300.00		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY			



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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

UCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this sundule, 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	NUMB	ĒR	
			_	
Page _	1	of	_2	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF
		PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
<u>code</u> C Kiwanis Club of La Porte PO Box 175 La Porte, IN 46350		Direct I In-Kind Payment of Debt Returned Contribution Other Purpose: Golf Outing Sponsor	\$425.00	\$425.00	6/3/21
<u>Code</u> Play for Jake Foundation 612 Monroe Street La Porte, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Golf Outling Tee Sign	\$100.00	\$100.00	6/15/21
Code A S' Idrews Products ٤ lariner Dr Michigan City, IN 46360		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Golf Tees	\$95.28	\$95.28	6/24/21
<u>code</u> <u>C</u> La Porte Pop Warner 901 E St La Porte, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: T shirt sponsor	\$200.00	\$200.00	7/16/21
<u>Code</u> <u>C</u> La Porte Republican Party 814 Jefferson Ave La Porte, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Uncoin Day Dinner Sponsor	\$1,000.00	\$1,000.00	7/17/21
Code C La Porte Republican Party 814 Jefferson Ave La Porte, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Golf Outing Sponsor	\$375.00	\$1,375.00	7/17/21
St. Andrew's Products 500 Mariner Dr M ⁱ nn City, IN 46360		Orect In-Kind Payment of Debt Returned Contribution Other Purpose: Golf Tees	\$133.50	\$228.78	7/30/21
	SUBTOTAL THIS PAG		\$ 2,328.78		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$		



(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

UCTIONS: 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	2	_

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
·····		PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
<u>code</u> C Brix Tasting Room 111 W 6th Street Michigan City, IN 46360		Direct In In-Kind Payment of Debt Returned Contribution Other Purpose: Golf Outing Sponsor	\$420.00	\$420.00	9/21/21
Code C Friends of Suzanne Crouch PO Box 2960	Lieutenant Governor	Direct In-Kind Payment of Debt Returned Contribution Other	\$500.00	\$500.00	9/8/21
Indianapolis, IN 46206	Lieutenant Governor	Purpose: Campaign donation			
Code A N Riley 1 Jelden St La Porte IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Tshirts	\$390.00	\$390.00	12/15/21
<u>Code</u> A Lamar 1770 W 41st Ave Gary, IN 46408		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: billboards	\$3,740.00	\$3,740.00	1/12/22
<u>Code A</u> Richard Gramarossa 110 May Ave Michigan City, IN 46360		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Yard Signs	\$14,200.00	\$14,200.00	1/17/22
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
<u>Code</u>		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG	E OF SCHEDULE B	\$ 19,250.00	<u> </u>	
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Fater total on ITEM 17a of H	E LAST PAGE ONLY	\$ 21,578.78		

No

-٠

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

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

IS THIS AN AMENDMENT?	🗌 Yes	
-----------------------	-------	--

(CFA-4)				
Summary Sheet				
FILE NUMBER				
46-22-23				
TOTAL PAGES IN ENTIRE CFA-4 REPORT				

ĩ

СОММ	ITTEE INFORMATIO	ON			
1. Full Name of Committee (as on Statement of Organization) The Committee to Elect Ron Heeg Sheriff	Check if this is a r	new nam	Ð.		
2. Acronym or Abbreviated Name (if any)	·····	3.		lephone Number	
· · · · · · · · · · · · · · · · · · ·		(219) 6	08-1004	
4. Mailing Address (Address where all campaign finance corresponder 5161 N Cameron	nce is received.)	Chec	k if this is a ne	waddress.	
5. City, State, ZIP Code		6.	Party Affiliatio	n (if applicable)	····
La Porte, IN 46350			Republican		
	ON (For Candidate	_			
7. Full Name of Candidate (Include any nickname.) Ron Heeg			Party Affiliation	n or if Independent	t Candidate
9. Office Sought (Include district number, If any. Not required for expl Sheriff of La Porte County	loratory committee.)		. County of Re	sidence	-
TYPE OF REPORT				CONVENTION	CANDIDATES ONLY
11. Check one:				Check one:	
Pre-Primary Pre-Election Annual Nomination Other				Pre-Conve	ention
Final / Disbands Committee (Lines 18, 19, and 20 must be 10".)	ırer (Within ten (10) days emen	d Statemen	of Organization.)	Post-Conv	rention
12. Reporting Period (mm/dd/yy): From: 1/1/22 Through: 4/15/.	22			OLUMN A	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting pe				3,899,27	
14. Cash on hand and investments January 1, current year.					
CONTRIBUTIONS AND RECEIP					
(Note: these amounts include in-kind contributions and loans, as well a	as cash contributions.)	-		ļ	
15a. Itemized (Use Schedule A.)				4,010.00	28,368.50
15b. Unitemized	!			1,449.00	2,599.00
15c. Add lines 15a and 15b in both columns.	<u>ا جا</u>	UBTOT	AL	5,459.00	30,967.50
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column	<u>B.</u>	TOT	AL	9,358.27	30,967.50
EXPENDITURES				•	
(Note: These amounts include in-kind expenditures and loan repayment	nts.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)				3,390.00	24,968.78
17b. Uniternized	-			77.04	107.49
17c. Add lines 17a and 17b in both columns.		SUBTOT	AL	3,467.04	25,076.27
18. Cash on hand and investments at close of this reporting period (Subtract 17c	from 16 in bath columns.)) то	TAL	5,891.23	5,891.23
19. Debts OWED BY the committee (Use Schedule D.)					
20. Debts OWED TO the committee (Use Schedule E.)	======	<u>,, , ,</u>		·····	
CERTIFICATI	ON			FC	OR OFFICE USE ONLY

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES	T OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CO	DRRECT AND C	OMPLETE	_			
Signature of Treasurer	Titte Treasurer	Date (mm/d 4/15	divy)	ΞÌ	I L N CLERKS OI	E D	1
Signature of Candidate (if applicate) WARNING: Any information contained in this report may not be copied in files a fraudulent report commits a Lovel & leiony. (IC 3-14-1-13) A p Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14)	erson who fails to file a complete or accurate repor	t as required by	122 ha knowing		APR 182	2022	
			CI	RK	Aflaon Ot	evens ICUIT COU	J <u>RT</u>



(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 <u>totaled on ITEM 158</u> 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 repeyments, 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 en individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

_Page	1	of	
	FILE		

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.} Clay Tumer 2015 Lakeshore Drive Long Beach, Indiana 46360	Contributions: Direct In-Kind (describe)			3/18/22
Contributor's Occupation (il required)	Other Receipts:	\$160.00	\$160.00	R. Heeg
² Ilene Zona 6706 N 300 W Michigan City, IN 46360	Contributions: Direct In-Kind (describe)			125.00
Contributor's Occupation (if required)	Other Reccipts: Interest Loan Miscellaneous (specify)	\$100.00	\$225.00	R. Heeg
³ Lisa and Michael Pierzakowski 3511 W Johnson Rd La Porte, IN 46350	Contributions: Direct In-Kind (describe) Other Receipts:	¢100.00		3/18/22
Contributor's Occupation (Il required)	Interest Loan Miscellaneous (specify)	\$100.00	\$475.00	R. Heeg
 Allen & Heather Stevens 5277 W 1475 S Hanna, IN 46340 	Contributions: Direct In-Kind (describe)			3/18/22
Contributor's Occupation (il required)	Other Receipts: Interest Loan Misoclianeous (specify)	\$150.00	\$300.00	R. Heeg
⁵ Blair Milo 1712 Michigan Ave La Porte, IN 46350	Contributions: Direct In-Kind (describe)	\$ 250.00		3/18/22
Contributor's Occupation (il required)	Other Receipts: Interest Loen Miscellaneous (specify)	\$250.00	\$250.00	R. Heeg
	HIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



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 <u>totaled on ITEM 15a</u> 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.

Page	_ 2	of	
	FILE	NUMBER	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
^{1.} Ralph & Karen Howes 3487 W Waverly Road La Porte, IN 46350	Contributions: Direct In-Kind (describe)			3/18/22
Contributor's Occupation (# required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$50.00	\$250.00	R. Heeg
² James Burr 1805 N Shebel Rd Michigan City, IN 46360	Contributions: Direct In-Kind (describe)	¢1.000.00	* 4 000 00	3/18/22
Contributor's Occupation (il required) Investor	Other Receipts: Interest Loan Misceflaneous (specify)	\$1,000.00	\$1,000.00	R. Heeg
^{3.} Francis Anscombe PO Box 349 Michigan City, IN 46360	Contributions: Direct In-Kind (describe) Other Receipts:	\$500.00	#F00.00	3/18/22
Contributor's Occupation (if required)	Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	R. Heeg
* Bruce & Penny Melton 2161 N 350 E Rolling Prairie, IN 46371	Contributions: Direct In-Kind (describe)	¢500.00	0005.00	3/18/22
Contributor's Occupation (il required)	Other Receipts: Interest Loen Miscellaneous (specify)	\$500.00	\$625.00	R. Heeg
^{5.} Kenneth & Rita Layton 1498 W 500 S La Porte, IN 46350	Contributions: Direct In-Kind (describe)			3/18/22
Contributor's Occupation (il required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$225.00	R. Heeg
	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	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 totated 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	ĒR
Page	<u>3</u> of	· · · · · · · · · · · · · · · · · · ·

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
^{1.} Johnny Sanchez 202 Avenue A Westville, IN 46391	Contributions: Direct In-Kind (describe)			3/18/22
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	R. Heeg
^{2.} Kristi Starr 1501 Scott St La Porte, IN 46350	Contributions: Direct In-Kind (describe)			3/18/22
Contributor's Occupation (il required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$150.00	\$150.00	R. Heeg
^{3.} Michael & Laura Hucker 3410 Tooten Hill Rd Jeffersonville, IN 47130	Contributions: Direct In-Kind (describe)			3/18/22
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	R. Heeg
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
	Contributions: Direct In-Kind (describe) Other Receipts:			
Contributor's Occupation (if required)	Interest Loan Miscellaneous (spec/fy)			
	HIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



State Form 4506 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as foan 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 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 NUMBE	R
Page	4	of	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
¹ Johnson Jones & Septic Service PO Box 417 Kingsbury, IN 46345	Contributions: Direct in-Kind (describe) Other Receipts:	\$250.00	\$250.00	1/4/22
2	Interest Loan Miscellaneous (specify)	4200.00	¥230.00	R. Heeg
 ² Meyer Glass & Mirror Co, Inc PO Box 8687 Michigan City, IN 46361 	Contributions: Direct In-Kind (describe)	\$250.00	¢250.00	3/18/22
	Other Receipts: Interest Loan Miscellaneous (specify)	φ230.00	, \$250.00 ,	R. Heeg
3.	Contributions: Direct In-Kind (describe) Other Receipts:			
4	Interest Loan Interest Miscellaneous (specify)			
	Contributions: Direct In-Kind (describe) Other Receipts:			
	Interest Loan Miscetlaneous (specity)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts:		- -	
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE A	A 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 B) ITEMIZED EXPENDITURES

	FILE	NUMB	ER
Page_	5	of	

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.

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
(sheet, number, try, state, tir code)	OFFICE SOUGHT (if applicable)	- and PURPOSE (be specific)	AMOUNT THIS	CUMULATIVE YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
Code C La Porte County Republican Party 814 Jefferson Ave La Porte, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Lincohn Day Dinner Sponsor	\$1,000.00	\$3,375.00	3/28/22
<u>Code_A</u> Ron Heeg 5161 N Cameron La Porte, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Relimburge for radio add at WIMS	\$990.00	\$990.00	3/16/22
<u>code</u> A Burkhart Signs		Direct In-Kind Payment of Debt Returned Contribution Other Purpase: Billboards	\$1,400.00	\$1,400.00	3/28/22
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Cods		Direct tr-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose;			
	SUBTOTAL THIS PAG	··	\$		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$		



, ¹³.

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R15 - 5-19) Indiana Electron Division (IC 3-9-5-14)

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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE	NUME	3ER	
Page	4	of	4	

RECIPIENT'S NAME AND MAIL.NG ADDRESS (street uumber. vity, state ZIP code)	RECIPIENT'S OCCUPATION	PURPOSE for specificit	OLUMN A AMOUN? "HIS PERIOD	COLUMN B CUMULATIVE FEAR-TO-DATE	JALE OF EXPENDITURE (mm/dd/yy/)
<u>code</u> A Hawkins Print Shop 315 Lincolnway La Porte, IN 46350		Direct In-Kind Payment of Dobt Results Contribution Other Purpose Mailler/Printing	\$2.969 46	\$2,969.46	10/21/22
Code A] Mike Gonder		Direct In Kind Payment of Debt Returned Contribution Other Purpose postage for mailers	\$7,542.40	\$9,345.86	11/9/22
Code		Clirec: In word Payment of Debt Returned Contribution Other Purpose			
Code		Otreck (Kind Payment of Debt Fedamed Sonaribution Other Purposet			
Code		Binest C-Kind Payment of Debi Peturned Continuation Other "urpose			
Code		Otrect Payment of Debt Refumed Constitution Other Pubbuse			
Code	ع المراجع ا	Ofreci In-Kind Paymeni of Debt Réturned Controbution Other Purpose			
TOTAL OF ALL PAG	SUBTOTAL THIS PAGE	LAST PAGE ONLY	\$ 10,511 86		
······································	(Enter total on ITEM 17a of the	e Summary Sheet.)	\$ 10,511.86		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R15 / 5-19) Indiane Election Division (IC 3-9-5-14)		(CFA-4 Summary S	Sheet
NSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For ssistance in completing this form, see instructions on the reverse side.	Т	LU-22-	25 E CFA-4 REPORT
STHIS AN AMENDMENT? Yes V No		22	
COMMITTEE INFORMATION			
I. Full Name of Committee (as on Statement of Organization) Check if this is a new The Committee to Elect Ron Heeg Sheriff	name.		
2. Acronym or Abbreviated Name (if any)	3. Comm (219	hittee Telephone Number) 608-1004	
Mailing Address (Address where all campaign finance correspondence is received.) D 161 N Cameron	Check if this	s is a new address.	
5. City, State, ZIP Code La Porte, IN 46350	6. Party Repub	Affiliation <i>(if applicable)</i> lican	
CANDIDATE INFORMATION (For Candidate's	Committe	es Only)	
7. Full Name of Candidate (<i>Include any nickname.</i>) Ron Heeg	8. Party Reput	Affiliation or If Independent	Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Sheriff of La Porte County	10. Cou La Po		
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within tan (10) days amend S	latement of Orga	nization.) Post-Conve	ention
12. Reporting Period (<i>mm/dd/yy</i>): From: 4/16/22 Through: 10/20/22		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		5,891.23	
14. Cash on hand and investments January 1, current year.			
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		19,193.57	47,562.0
15a. Itemized (Use Schedule A.)		2,954.00	5,553.0
15b. Unitemized SU	BTOTAL	22,147.57	53,115.0
15c. Add lines 15a and 15b in both columns.	TOTAL	28,038.80	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		15,363.46	40,332.2
17b. Unitemized		0.00	107.4
	JETOTAL	15,363.46	40,439.
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	12,675.34	12,675.3
19. Debts OWED BY the committee (Use Schedule D.)			No.
20. Debts OWED TO the committee (Use Schedule E.)			
		F	OR OFFICE USE ONL
CERTIFICATION	S TRUE, COF		
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT		Date (mm/dd/yy) F I	LEI
Signature of Candidate (if applicable)		10 30 33 IN C Date (mm/dd/yy)	LERKS OFFICE
	ose. (IC 3-9-4-	5) A person who knowingly	t 2 1 202 2
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purp files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or ac Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC			
			aory Stevers

\$ 1 •

9:	40	17	U	n
			-	

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 <u>ITEM 15a</u> 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.

	FIL	E NUMBER
Page _	1	_of_22_

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)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1. Michael and Laura Hucker 3410 Tooten Hill Rd Jeffersonville, IN 47130	Contributions: Direct In-Kind (describe)			4/14/22
	Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	R. Heeg
Contributor's Occupation (if required)	Contributions:			
1501 Michigan Ave La Porte, IN 46350	Direct In-Kind (describe)			6/1/22
	Other Receipts:	\$1,000.00	\$1,500.00	R. Heeg
Contributor's Occupation (if required) LP Co Auditor 3. Mitchell Feikes	Contributions:			
2178 Whispering Blvd La Pore, IN 46350	Direct In-Kind (describe)			4/29/22
	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$1,000.00	R. Heeg
Contributor's Occupation (if required) Business Owner	Contributions:	······································		-
4 Rip and Shelley Ludlow 1103 W. 19th St La Porte, IN 46350	Direct			7/26/22
	Other Receipts:	\$150.00	\$150.00	R. Heeg
Contributor's Occupation (if required)	Contributions:			
700 Cocoanut Ave, Apt 346 Sarasota, FL 34236	Direct In-Kind (describe)			8/11/22
-	Other Receipts:	\$300.00	\$300.00	R. Heeg
Contributor's Occupation (if required)		. 10.00		
	L THIS PAGE OF SCHEDULE A	\$ 1900		
TOTAL OF ALL PAGES OF SCHEDUL (Enter total on IT	E A ON THE LAST PAGE ONLT EM 15a of the Summary Sheet.)	\$		

(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 <u>Inteled on ITEM 15a</u> of the Summary Sheet. All cumulative contributions from individuals **OVER \$100** per contributor. within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1.000 in contributions during the calendar year. Otherwise, this is optional.

	FILE NUMBER	
Page	2_of_22_	

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.Kenneth & Rita Layton 1498 W 500 S La Porte, IN 46350	Contributions: Direct In-Kind (describe)			9/12/22
	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$325.00	R. Heeg
Contributor's Occupation (if required)	Contributions:			
2. Tom & Jackie Dermody 1658 S Willow Bend Dr La Porte, IN 46350	Direct			9/12/22
	Other Receipts:	\$100.00	\$250.00	R. Heeg
Contributor's Occupation (# required) 3. Frances Milo 92 Keston Elm Dr La Porte, IN 46350	Contributions:			9/12/22
Pueirors Owner	Other Receipts:	\$100.00	\$350.00	R. Heeg
Contributor's Occupation (if required) Business Owner 4. Ilene Zona 6706 N 300 W Michigan City, IN 46360	Cantributions: Direct In-Kind (describe)			9/12/22
	Other Receipts:	\$100.00	\$325.00	R. Heeg
Contributor's Occupation (if required) 5. Lisa and Michael Pierzakowski 3511 W Johnson Rd La Porte, IN 46350	Contributions:			9/12/22
	Other Receipts:	\$50.00	\$525.00	R. Heeg
Contributor's Occupation (if required)	L THIS PAGE OF SCHEDULE A	\$45000		
TOTAL OF ALL BAGES OF SCHEDUL		t t		

(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, soccupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE	NUMBER	
Page	3	of 22	

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. Mitchell Feikes 2178 Whispering Blvd La Pore, IN 46350	Contributions: Direct In-Kind (describe)			4/29/22
	Other Receipts:	\$250.00	\$1,750.00	R. Heeg
Contributor's Occupation (if required)	Contributions:			
2 Allen & Heather Stevens 5277 W 1475 S Hanna, IN 46340	Direct			9/12/22
	Other Receipts:	\$100.00	\$400.00	R. Heeg
Contributor's Occupation (if required)				
3.Adam Koronka 2202 Mustang Dr La Porte IN 46350	Contributions:	1		9/12/22
	Other Receipts:	\$100 .00 .	\$200.00	R. Heeg
Contributor's Occupation (if required) Business Owner	Contributions:		-	
4 Cheryl & Steven Reinhart 3201 N Briar Leaf Ct La Porte, IN 46350	Direct In-Kind (describe)			9/12/22
	Other Receipts:	\$125.00	\$125.00	R. Heeg
Contributor's Occupation (if required) 5. Ralph & Karen Howes 3487 W Waverly Rd La Porte IN 46350	Contributions:			9/12/22
	Other Receipts:	\$50.00	\$275.00	R. Heeg
Contributor's Occupation (if required)	THIS PAGE OF SCHEDULE A	\$1075.00	· · · · ·	
TOTAL OF ALL PAGES OF SCHEDULE		\$ 625.00		
(Enter total on ITE	EM 15a of the Summary Sheet.)	\$		

,

(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	NUMB	ER	
Page_	14	of	22	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	OK UTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
t. Tom and Martha Swanson 344 Grayson Rd La Porte, IN 46350	Contributions: Direct In-Kind (describe)			9/12/22
	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$150.00	R. Heeg
Contributor's Occupation (il required) 2. Harold and Jane Parker 2602 E St Rd 4 La Porte IN 46350	Contributions: Direct In-Kind (describe)			9/12/22
	Other Receip1s: Interest Loan Miscellaneous (specify)	\$100.00	\$225.00	R. Heeg
Contributor's Occupation (if required) 3. Thomas and Marilyn Boyd 10104 Beverly Lane La Porte, IN 46350	Contributions: Direct In-Kind (describo)		0000 00	9/12/22
Contributor's Occupation (# required) Business Owner	Other Receipts:	\$100.00	\$225.00	R. Heeg
4. Gerard and Karen Vandervelden 2602 E St Rd 4 La Porte, IN 46350	Contributions: Direct In-Kind (describe)			9/12/22
	Other Receipts:	\$100.00	\$225.00	R. Heeg
Contributor's Occupation (if required) 5. Duane & Bonnie Miller 605 Lakeside St La Porte IN 46350	Contributions:			9/12/22
	Other Roceipts: Interest Loan Miscellaneous (specify)	\$100.00	\$225.00	R. Heeg
Contributor's Occupation (if required)	L THIS PAGE OF SCHEDULE A	\$ 500.00		
TOTAL OF ALL PAGES OF SCHEDUL		e		

(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 raverse side. This schedule is used to document contributions and receipts <u>totaled on ITEM 15a</u> 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, rehates, 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	NUMB	ER	
Page_	5	of	22	

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
Alten & Heather Stevens 5277 W 1475 S Hanna, IN 46340	Contributions: Direct In-Kind (describe)			9/12/22
	Other Receipts:	\$150.00	\$400.00	R. Heeg
ontributor's Occupation (# required)	Contributions:			9/12/22
	Other Receipts:	\$200.00	\$200.00	R. Heeg
iontributor's Occupation (if required) Ryan and Sarah Seaburg 11X Edgewood Ct La Porte, IN 46350	Contributions: Direct In-Kind (describe)			9/12/22
	Other Receipts Interest Loan Miscellaneous (specify)	\$500.00	\$750.00	R. Heeg
contributor's Occupation (<i>if required</i>) Bruce and Penny Melton 2161 N 350 E Rolling Prairie, IN 46371	Contributions:			9/12/22
	Other Receipts:	\$500.00	\$1,125.00	R. Heeg
Contributor's Occupation (if required) 5, Ralph & Karen Howes 3487 W Waverly Rd La Porte, IN 46350	Contributions:			9/12/22
	Other Receipts:	\$50.00	\$350.00	R. Heeg
Contributor's Occupation (if required)		\$ 1400 .00	· .	
TOTAL OF ALL PAGES OF SCHEDUL	L THIS PAGE OF SCHEDULE A E A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet.)	c		×

1

1

(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	NUMB	ER	
Page	6	of	22	

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1. Timothy Stabosz 1501 Michigan Ave La Porte, IN 46350	Contributions:			9/30/22
	Other Receipts: interest Loan Miscellaneous (specify)	\$2,000.00	\$3,500.00	R. Heeg
Contributor's Occupation (<i>if required</i>) <u>LP Co Auditor</u> 2. Jaye Fuller 10 Jamestown Dr Michigan City, IN 46360	Contributions: Direct In-Kind (describe)			9/30/22
	Other Receipts;	\$400.00	\$1,400.00	R. Heeg
Contributor's Occupation (if required) <u>Retired Electrician</u> 3. Rayshelle & David Cooney 7772 Applewood Dr La Porte, IN 46350	Contributions:			9/30/22
	Other Receipts:	\$400.00	\$400.00	R. Heeg
Contributor's Occupation (if required) 4. Cheryl & Steven Reinhart 3201 N Briarleaf Ct La Porte, IN 46350	Contributions: Direct In-Kind (describe)			9/30/22
	Other Receipts:	\$100.00	\$225.00	R. Heeg
Contributor's Occupation (if required) 5. Duane and Bonnie Miller 605 Lakeside St La Porte, IN 46350	Contributions: Direct In-Kind (describe)	,		9/30/22
	Other Receipts:	\$100.00	\$325.00	R, Heeg
Contributor's Occupation (if required)	L THIS PAGE OF SCHEDULE A	\$ 300,00		
TOTAL OF ALL PAGES OF SCHEDUL		\$		

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

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

.

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 iterrized 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 iternized 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	
		, <u> </u>	
Page_	7	of_22	

CONTRIBUTOR'S FULL NAME AND OCCUPATION		COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.Clay Turner	Contributions:			
2015 Lakeshore Dr	Direct			9/30/22
Long Beach, IN 46360	In-Kind (describe)			5150122
		\$100.00	\$260.00	
	Other Receipts:	\$100.00	\$200.00	
	Miscellaneous (specify)			R. Heeg
Contributor's Occupation (if required)				
2. William and Mary Christakes	Contributions:			
610 Lakeside St	Direct			9/30/22
La Porte, IN 46350	In-Kind (describe)			9/30/22
		¢050.00	\$750.00	
	Other Receipts:	\$250.00	\$750.00	
	Miscellaneous (specify)			R. Heeg
				, , , , , , , , , , , , , , , , , , ,
Contributor's Occupation (if required)				
3. Brian Chalik	Contributions:			
2029 Michigan Ave	in-Kind (describo)			9/30/22
La Porte, IN 46350				
	Other Receipts:	\$500.00	\$500.00	
	🔲 Interest 🗌 Loan			
	Miscellaneous (specify)			R. Heeg
Contributor's Occupation (if required)			<u> </u>	
4. Renne Ostermiller Wolf and William Wolf	Contributions:			
370 Oak Dr	Direct Direct In-Kind (describe)			10/12/22
La Porte, IN 46350				
	Other Receipts:	\$250.00	\$250.00	
	Interest Loan			
	Miscellaneous (specify)			R. Heeg
Contributor's Occupation (if required)	-			
5. Harold and Jane Parker	Contributions:			
2602 E St Rd 4 •	Direct			10/12/22
La Porte IN 46350	In-Kinó (describe)			
		\$75.00	\$300.00	
	Other Receipts:			
	Miscellaneous (specify)			R. Heeg
Contributor's Occupation (if required)	L THIS PAGE OF SCHEDULE A	\$ 11750		
TOTAL OF ALL PAGES OF SCHEDUL	E A ON THE LAST PAGE ONLY	æ		
(Enter total on IT	EM 15a of the Summary Sheet.)	*		

(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	8	of	22	

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.Joan and Guy DiMartino 29034 Cutter Lane Leesburg, FL 34748	Contributions: Direct In-Kind (describe)			10/12/22
	Other Receipts: Interest Loan Miscellaneous (specify)	\$125.00	\$375.00	R. Heeg
Contributor's Occupation (if required) 2. Gerard and Karen Vandervelden	Contributions:			
5822 W 250 N La Porte, IN 46350	Direct			10/12/22
	Other Receipts:	\$125.00	\$350.00	R. Heeg
Contributor's Occupation (if required)	Contributions:	·····		,
6706 N 300 W Michigan City, IN 46360	Direct			10/12/22
	Other Receipts:	\$125.00	\$450.00	R. Heeg
Contributor's Occupation (if required) 4. Drew and Jamie Buchanan 2108 Woodlawn Dr	Contributions:			10/12/22
La Porte, IN 46350	in-Kind (describe)			IUT IESZE
	Other Receipts: Interest Loan Miscellaneous (specify)	\$125.00	\$125.00	R. Heeg
Contributor's Occupation (if required)	- Contributions:			
741 W Maple St Hinsdale, IL 60521	Direct In-Kind (describe)			10/12/22
	Other Receipts:	\$250.00	\$250.00	R. Heeg
Contributor's Occupation (if required)	L THIS PAGE OF SCHEDULE A	\$ 750 "-		
TOTAL OF ALL PAGES OF SCHEDUL	E A ON THE LAST PAGE ONLY	e		
(Enter total on IT	EM 15a of the Summary Sheet.)	4		

State Form 4606 (R1575-19) 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	9	_of_22

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	INTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)		COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
(Street, humber, city, state, zir code) 1.Adam and Shannon Hannon	Contributions:	PERIOD		
2183 W 250 S	Direct			10110100
La Porte, IN 46350	In-Kind (describe)			10/12/22
	Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	R. Heeg
Contributor's Occupation (if required)	Contributions:			
2015 Lake Shore Dr	Direct			40/40/00
Long Beach, IN 46360	In-Kind (describe)			10/12/22
	Other Receipts:	\$125.00	\$125.00	R. Heeg
Contributor's Occupation (if required)				
3. Brian Chalik	Contributions:			
2029 Michigan St	In-Kind (describe)			10/12/22
La Porte IN 46350				
	Other Receipts:	\$500.00	\$1,000.00	R. Heeg
Contributor's Occupation (if required) Retired				
4. Duane Parry 2206 Maple St Michigan City, IN 46360	Contributions: Direct In-Kind (describe)			10/12/22
	Other Receipts: threrest Loan Miscellaneous (specify)	\$225.00	\$225.00	R. Heeg
Contributor's Occupation (il required)	Contributions:			
5. Adam Koronka 2202 Mustang	Direct			10/12/22
La Porte, IN 46350	In-Kind (describe)			10/12/22
	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$300.00	R. Heeg
Contributor's Occupation (if required)	_			
	L THIS PAGE OF SCHEDULE A	\$ 156.00		
TOTAL OF ALL PAGES OF SCHEDUL (Enter total on IT	E A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet.)	\$		

(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 <u>totaled on ITEM 15a</u> 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	NUMB	ER	
Page	10	of	22	_

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.Don and Sue Babcock 631 E Lakfront Beverly Shores, IN 46301	Contributions: Direct In-Kind (describe)	TENES		10/12/22
	Other Receipts:	\$150.00	\$150.00	R. Heeg
Contributor's Occupation (if required) 2. Tim and Sue Anderson 2961 Lake Shore Dr Long Beach, IN 46360	Contributions: Direct In-Kind (describe)			10/12/22
	Other Receipts:	\$500.00	\$5,500.00	R. Heeg
Contributor's Occupation (if required) 3. James Dehner 2300 Fairway Dr Long Beach, IN 46360	Contributions:			10/12/22
Dukand	Other Receipts:	\$125.00	\$125.00	R. Heeg
Contributor's Occupation (if required) Retired 4. William Espar 116 Woodside Dr Michigan City IN 46360	Contributions:			10/12/22
	Other Receipts:	\$250.00	\$250.00	R. Heeg
Contributor's Occupation (if required) 5. Kristi Starr 12601 Europa Lane Austin TX 78727	Contributions:			10/12/22
-	Other Receipts:	\$150.00	\$300.00	R. Heeg
Contributor's Occupation (if required) SUBTOTA	LI THIS PAGE OF SCHEDULE A	\$ 117500		
TOTAL OF ALL PAGES OF SCHEDIN		í e		

(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 <u>totaled on ITEM 15a</u> 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	NUMB	ER	
Page _	<u>ì.</u>	of	22	

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE	RECEIVED BY
(street, number, city, state, ZIP code) 1. Carlson Kenneth E DBA Pine Lake Service Center 1034 Blueridge Dr La Porte. IN 46350	Contributions: Direct In-Kind (describc) Other Receipts: Interest Loan	\$150.00	\$150.00	9/30/22
	Miscellaneous (specify)			R. Heeg
Contributor's Occupation (# required) 2.Lisa and Michael Pierzakowski 3511 W Johnson Rd La Porte, IN 46350	Contributions: Direct In-Kund (describe)			9/30/22
	Other Receipts:	\$128.57	\$653.57	R. Heeg
Contributor's Occupation (if required) 3. Miscellaneous Cash Donations at Fundraiser	Contributions:			9/12/22
	Other Receipts:	\$1,900.00	\$1,900.00	R. Heeg
Contributor's Occupation (if required)	Contributions:			
4.	Direct In-Kind (describe)			
	Other Receipts:			
Contributor's Occupation (if required)	Contributions:			-
5.	Direct			
·	Other Receipts:			
Contributor's Occupation (# required)		Same St	1	.t
SUBTOTA TOTAL OF ALL PAGES OF SCHEDUL	L THIS PAGE OF SCHEDULE		~1	
TOTAL OF ALL PAGES OF SCHEDOL (Enter total on IT	EM 15a of the Summary Sheet	\$ 9,193.5		



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

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

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

	FILE NUMBER	
Page	12 of 22	_

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. Gadget Fix Up LLC 2402 N St Rd 39 La Porte, IN 46350	Contributions: Direct In-Kind (describe)			9/12/22
	Other Receipts:	\$150.00	\$150.00	R. Heeg
2. Pine Lake Realty 603 State St, Ste A La Porte IN 46350	Contributions: Direct In-Kind (describe)			9/12/22
	Other Receipts:	\$500.00	\$500.00	R. Heeg
3. LP Wings LLC 23 Pine Lake Ave La Porte, IN 46350	Contributions: Direct In-Kind (describe)			9/12/22
	Other Receipts:	\$500.00	\$500.00	R. Heeg
 Frank Keszei Funeral Home 1117 Indiana Ave La Porte, IN 46350 	Contributions: Direct In-Kind (describe)			9/12/22
	Other Receipts:	\$500.00	\$500.00	. R. Heeg
5. North Star Stone Inc 325 N 325 E Valaraiso, IN 46383	Contributions: Direct In-Kind (describe)			9/12/22
· · · · · · · · · · · · · · · · · · ·	Other Receipts:	\$550.00	\$550.00	R. Heeg
	TAL THIS PAGE OF SCHEDULE			
TOTAL OF ALL PAGES OF SCHED	ULE A ON THE LAST PAGE ONL' ITEM 15a of the Summary Sheet	Y S		s

•



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

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

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

	FILE	È NUMBER	, in the second se
Page_	13	_of_22_	

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. Michiana Insurance Services, Inc 5385 N Johnson Rd Michigan City IN 46360	Contributions:			9/12/22
	Olher Receipts:	\$400.00	\$400.00	R. Heeg
2. Tazco PO Box 707 Westville. IN 46391	Contributions:			9/30/22
-	Other Receipts: Interest Loan Miscellaneous (specify)	\$150.00	\$150.00	R. Heeg
3.	Contributions: Direct tn-Kind (describe)			
	Other Receipts:			
4.	Contributions:			
	Other Receipts:			
5.	Contributions:			
	Other Receipts:			
SUBTOT	AL THIS PAGE OF SCHEDULE	A \$ 55000		
TOTAL OF ALL PACES OF SCHEDU		YCANCOR		

REPORT OF RECEIPTS AND EXPENDITURES



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

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

Itemized Contributions and Other Receipts

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

	FILE	NUMBER
Page	4	_of_22

CONTRIBUTOR'S FULL NAME AND	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
	Contributions:			
	Direct In-Kind (describe)		-	
	Other Receipts:			
	Miscellaneous (specify)			
2	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	🗌 Interest 🔲 Loan			
	Miscellaneous (specify)			
	Contributions:			
3.	Direct .	-	E .	
	In-Kind (describe)			
	Other Receipts:			
	Miscellaneous (specify)			
4.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Miscellaneous (specify)			
	Contributions:			
5.	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
SUBTOTA	L THIS PAGE OF SCHEDULE	a s 🕖		
TOTAL OF ALL PAGES OF SCHEDUL	E A ON THE LAST PAGE ONL EM 15a of the Summary Sheet	y s 0		

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

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$260, 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 ioan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
	•			
Page	15	_of_	22	

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 YEAR-TO-DATE	RECEIVED BY
(street, number, city, state, ZIP code)	Contributions:	PERIOD	TEAR-TO-DATE	
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
2.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Interest 🗌 Loan			
	Miscellaneous (specify)			
3.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
			. N	
4.	Contributions:			
	Direct	-		
	In-Kind (describe)			
-	Other Receipts:			
	Miscellaneous (specify)			
5	Contributions:	•		
	Direct			
	In-Kind (describe)			
	Other Receipts:			1
	Miscellaneous (specify)			
SUBTOTAL TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A	s 0		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLT W 15a of the Summary Sheet.)	\$ ()		

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

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS Itemized Contributions and Other Receipts

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

FILE NUMBER			
Page	16_	of 22	

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS	OR OTHER RECEIPT	AMOUNT THIS PERIOD	YEAR-TO-DATE	RECEIVED BY
(street, number, city, state, ZIP code) 1. John T Boyd for Sheriff 10104 N Beverly Ln La Porte, IN 46350	Contributions: Direct In-Kind (describe)	\$400.00	\$550.00	9/12/22
	Other Receipts:	•••••		R. Heeg
2. John T Boyd for Sheriff 10104 N Beverly Ln La Porte, IN 46350	Contributions: Direct In-Kind (describe)	\$140.00	\$690.00	9/30/22
	Other Receipts:	\$140.00		R. Heeg
3. John T Boyd for Sheriff 10104 N Beverly Ln La Porte, IN 46350	Contributions: Direct In-Kind (describe)	\$250.00	\$940.00	10/12/22
	Other Receipts:	\$200.00		R. Heeg
4 Committee to Elect Bohacek Senate	Contributions.		£400.00	9/30/22
	Other Receipts:	\$400.00	\$400.00	R. Heeg
5. Committee to Elect Richard Mrozinski 2303 E 150 N La Porte IN 46350	Contributions: Direct In-Kind (describe)			9/12/22
	Olher Receipts:	\$400.00	\$400.00	
SUBTO	TAL THIS PAGE OF SCHEDULE #	1 \$ 15900		
TOTAL OF ALL PAGES OF SCHED	ULE A ON THE LAST PAGE ONLY	1 .		
(Enter total on	ITEM 15a of the Summary Sheet.) -		



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

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

Itemized Contributions and Other Receipts

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

.

FILE NUMBER				
-				
	1-7	-	20	
Page_		_ of _	do	

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS	OR OTHER RECEIPT	AMOUNT THIS PERIOD	YEAR-TO-DATE	RECEIVED BY
(street, number, city, state, ZIP code) 1 Friends of Jim Pressel 1772 Lofgren Rd Rolling Prairie, IN 46371	Contributions: Direct In-Kind (describe)			9/12/22
Kulling Flame, in 4007	Other Receipts:	\$100.00	\$250.00	R. Heeg
	Miscellaneous (specify)			
2. Friends of Jim Pressel 1772 Lofgren Rd Rolling Prairie, IN 46371	Contributions: Direct In-Kind (describe)	\$250.00	\$500.00	10/12/22
	Other Receipts:			R. Heeg
3. Committee to Elect Tom Dermody 0615 W Maple St La Porte IN 46350	Contributions: Direct In-Kind (describe)	\$200.00	\$200.00	10/12/22
	Other Receipts: interest Loan Miscellaneous (specify)	\$200.00	\$200.00	R. Heeg
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts:			
5.	Contributions:			
	Other Receipts:			
SUBTOTA	L THIS PAGE OF SCHEDULE A	\$ 550°°		
TOTAL OF ALL PAGES OF SCHEDUL		e 201000		

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				
	10		าา	
Page	18	_ of _	ar	_

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (<i>if applicable</i>)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
_{ode} A Ron Heeg 161 N Cameron a Porte IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Radio Ads WCOE	\$675.00	\$675.00	4/25/22
_{code} <u>C</u> eadership La Porte County		Direct I In-Kind Payment of Debt Returned Contribution Other Purpose: sponsor golf outing	\$ 420.0 0	\$420.00	5/24/22
_{Code} A Michael Gonder		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: mailing costs	\$1,803.46	\$1,803.46	5/18/22
_{Code} A Lamar		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: billboards	\$2,820.00	\$2,820.00	7/6/22
_{Code} A Lamar		Direct in-Kind Payment of Debt Returned Contribution Other Purpose: billboards	\$1,705.00	\$4,525.00	8/29/22
_{Code} O 1st Source Bank			\$8.00	\$8.00	8/31/22
Code O 1st Source Bank			\$8.00	\$16.00	9/30/22
	CURTOTAL THIS P	AGE OF SCHEDULE E	\$ 74394		. <u>1.</u>

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

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER

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.

RECIPIENT'S NAME AND MAILING ADDRESS	(street number city state ZIP code) and		COLUMN A COLUMN B DATE C AMOUNT THIS CUMULATIVE EXPENDIT		
where a manuscripting, out of the owner	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	(mm/dd/yy)
Code A WEFM		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Radio Ads	\$756.00	\$756.00	9//30/22
Code C Family Advocates Battle of Badges fundraiser sponsor		Direct In-Kind Payment of Debt Returned Contribution Other Purpose' SPONSOF	\$200.00	\$200.00	9/26/22
Code F Briar Leaf Gold Club		Direct Int-Kind Payment of Debt Returned Contribution Other Purpose: golf outling fundralser	\$3,637.00	\$3,637.00	9/23/22
Code A WCOE Radio		Direct I In-Kind Payment of Debt Returned Contribution Other Purpose: radio ads	\$3,331.00	\$4,006.00	9/29/22
Code		Direct In-Kind Peyment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
<u>Code</u>		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
		AGE OF SCHEDULE B			
TOTAL OF ALL	PAGES OF SCHEDULE B ON T (Enter total on ITEM 17a o	HE LAST PAGE ONLY f the Summary Sheet.)	ler-n all		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

npleting this schedule, see instructions on the rev ount paid to political committees supporting or opp	osing a public question, MUST be itemiz	red on this schedule.		FILE NUMBE	
		1	Page	20_of_	22
	PUBLIC QUESTIC	N INFORMATION			
er Text of Public Question.					
		·			
	Locai				
sition: Supported Oppos	3	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
CIPIENT'S NAME AND MAILING ADDRESS (street, number, cify, state, ZIP code)	RECIPIENT'S OCCUPATION	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
<u></u>		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
de	, ,	Direct In-Kind Payment of Debt Returned Contribution Other Purpose;			
de		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
de		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
ode		Direct In-Kind Paymant of Debt Returned Contribution Other Purpose:			
ode		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS P	AGE OF SCHEDULE C	\$ ()		· -
TOTAL OF ALL PAG	GES OF SCHEDULE C ON T (Enter total on ITEM 17a c	HE LAST PAGE ONLY	6 0		



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 N	UMBER
	<u>)</u>	<u> </u>
Page _	α	of de

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED (mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
	· ·				
LENDER'S OCCUPATION:	· · ·				
LENDER'S OCCUPATION:					
			-		
LENDER'S OCCUPATION:	· · · · · · · · · · · · · · · · · · ·				
	4				
LENDER'S OCCUPATION:	-				
LENDER'S OCCUPATION:					
LENGER'S OCCUPATION:					r
	:				
LENDER'S OCCUPATION					
		SUBTOT		OF SCHEDULE	
	TOTAL OF A	Enter total on	ITEM 19 of the	Summary Sheet.	

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

.

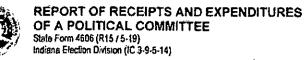
(CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

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

FILE NUMBER			
	0-		
Page_	dd_of	22	

BORROWER'S NAME AND MAILING ADDRESS	CO-SIGNER'S NAME AND MAILING ADDRESS (if any)	ORIGINAL AMOUNT	DATE DEBT	CUMULATIVE PAID	OUTSTANDING BALANCE THIS	
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	(mm/dd/yy) YEAR-TO-DATE		PERIOD	
	· .					
				-		
				-		
	· ·					
· · ·						
			-			
SUBTOTAL THIS PAGE OF SCHEDULE E						
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summary Sheet.)					\$ 0	
		(Enter total of	n ITEM 20 of the	Summary Sheet.)	_1	

OF A POLITICAL COMMITTEE State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)			(CFA-4) Summary Sheet		
INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For			FILE NUI	WBER	
assistance in completing this form, see instructions on the reverse side.	ļ	TOTAL	46-22-	23	
IS THIS AN AMENDMENT? Yes X No		TUTAL	AGES IN ENT	RE CFA-4 REPO	
COMMITTEE INFORM		•			
1 Full Name of Committee for a	is a new name	l.			
2. Acronym or Abbreviated Name (if any)	3.	Committee Tel	ephone Number		
4 Mailing Address (Address uboth of an and a	(······	8-1004		
4 Mailing Address (Address where all campaign finance correspondence is received.) 5161 N Cameron	Check	if this is a nev	v address.		
5 City. State, ZIP Code La Porte, IN 46350	6 Party Affiliation (if applicable)				
	l Re	publican			
CANDIDATE INFORMATION (For Candid 7 Full Name of Candidate (Include any nickname)					
Ron Heeg	4	arty Affiliation	or if independent	Candidate	
9 Office Sought (Include district number, If any. Not required for exploratory committee Sheriff of La Porte County					
TYPE OF REPORT	La	Porte			
11 Check one:				CANDIDATES ONL	
Pre-Primary Pre-Election Annual Normation Other			Check one		
Final / Disbands Committee (Lines 18, 19, and 20 must be 10') Outgoing Treasurer (Within fan /10; days i	amport Statement et	· ····································	Pre-Conver		
12 Reporting Period (mm/dd/yy):			and the second	nuon	
From: 10/21/22 Through: 1/18/23			UMN A	COLUMN B Year to Date	
13. Cash on hand and investments at the beginning of this reporting period			12,675.34	Ceal to Date	
14 Cash on hand and investments January 1, current year			12,010.01		
CONTRIBUTIONS AND RECEIPTS					
(Note these amounts include in-kind contributions and loans, as well as cash contribution 15a. Itemized (Use Schedule A.)	s.)				
15b. Uniternized			1,400.00	48.962.0	
15c. Add lines 15a and 15b in both columns.	CHOTOTAL		150.00	5,703 00	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	SUBTOTAL TOTAL		1,550.00	54,665.07	
EXPENDITURES	TUTAL		14.225.34		
Note. These amounts include in-kind expenditures and loan repayments)			2		
17a Itemized (Use Schedule B.) (Public Question: use Schedule C.)			10,511.86	50.044.44	
7b. Unitemized			24.00	50,844.10 131.49	
7c Add lines 17a and 17b in both columns	SUBTOTAL		10,535.86	50,975.59	
8. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both column	s.) TOTAL	-	3,689.48	3.689.48	
9 Debts OWED BY the committee (Use Schedule D)		-	0.00	0.000.40	
0. Debts OWED TO the committee (Use Schedule E.)		1	0.00		
CERTIFICATION					
CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF	TT IS TRUE, CO	RECT AND COM	PUR	OFFICE USE ONLY	
	Ī	Date (mm/or/		LED	
ignalure of Canodale pit application		. 1 · · / to		RKS OFFICE	
/// Q		Date (mm/pi/			
ARNING Any information contained in this report may not be copied for sale or used for any commercial pues a fraudulent report commits a Level b felony. (IC 3-14-1-13) A person who fails to file a complete or ampaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties.	apose (IC 3-9-4- accurate report (IC 3-9-4-	5) A person Who	2 knowingly JAN e Indiana	1 8 2023	
the may be sounded to clear perioduces.	10 V-349 10 10 3	-3-9-11, IL 3-94-		nu Otivers	



(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 totated on <u>TTEM 158</u> of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a catendar year MUST be literated on this schedule (aver \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, refums of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a catendar year, MUST be literated on this echedule (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.

FILE NUMBER				
Page _	1	of	9	

.

<u>م</u>ني ا

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED
(street, number, city, state, ZIP code)	, OK OMERINESER I	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.Bradford Smith	Contributions		TEARTOBATE	
610 Dogwood Dr	Direct	1		
Trail Creek, IN 46360	In-Kind (describe)			10/31/22
	Other Receipts.	\$125,00	\$125,00	
	🛄 Interest 🔲 Loan			
	Miscellancous (specify)			R. Heeg
Contributor's Occupation (if (Squired)				- 3
2 Francis R Anscombe	Contributions			
PO Box 349	Direct			
Michlgan City, IN 46361	In-Kind (describe)			10/31/22
				10,01,22
	Other Receipts.	\$275.00	\$775.00	
	interest Loan	42.0.00	\$775.00	
	Miscellaneous (specily)			R. Heeg
Contributor's Occupation (f ragingo)				it, neeg
3. Jacob A Smoker	0			
9672 \$ 900 W	Contributions Direct		-	1
Wanatah, IN 46390	In-Kind (describe)			10/5/00
	Tral withing (accouncy			12/5/22
	Other Receipts	\$200.00	6000 00	
	Interest Loan	\$200.00	\$200.00	i
	Miscellaneous (speci/y)	1 1	1	D
				R. Heeg
Contributor's Occupation (# required)				
•	Contributions			
	In-Kind (describe)		ł	
				1
			Ĺ	
	Other Receipts:		[
	Miscellaneous (specify)			
Contributor's Occupation (d'required,				1
5	Contributions:			
	Direct			
	In-Kind (describe)			
_ , , , , , , , , , , , , , , , , , , ,	Other Receipts:		ľ	
	Interest Loan	ł		
P 1 7	Miscellaneous (specify)			i
Contributor a Occupation (1 required)	······			
SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$ 600.00		
TOTAL OF ALL PAGES OF SCHEDULE A				
(Enter total on ITEM	15a of the Summary Sheet.)	\$		
1			· ····	

ī.

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4605 (R15 - 5-19)

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

INSTRUCTIONS: Prease type or pant 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 totaged on 17EM 17a of the

Summary Sheet Acoumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per summary oneer as commanive expenses pair to movinuees, ousinesses, etc. organizations and once employ or the party committee). All cumulative expenses. Including in-kind, regardless of amount part to political committees, (such as lransfers-out from candidate, legislative

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

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

HUR WARDER Page

UBSPRESS AND AND AND AND ADDRESS ATCHER BOARD BURNER THE DESCRIPTION OF T 1 SL (1933) 3 istant nation rily, with the way S), UMICI dener Barenofiare and the second Sup SUMAL SAUSS ໜ້າ ເອີ້ະເອີ້ອຍເຮົ້າ ເຫຼືອງຫຼາດເຄັ້າຫຼໍ່ (2023)DE (Es e Maine) : 梅湖 DIA TEN Code A Creck I In-Nins Payment of Tesht Hawkins Print Shop Returne / Contab. com 315 Lincolnway \$2,969.46 \$2,969.46 🗋 Other 🔄 10/21/22 La Porte, IN 46350 PINTAGE Mailier/Printing 🗋 Ölect 🔛 Pr-Kind Code A Payment of Debt Mike Gonder Etames Contribution \$7,542.40 Gitter _____ \$9,345.86 11/9/22 Puttone postage for mailers Code Direc: Din Nad Payment or Debi Returned Contraction Clotter____ Parrose 🗋 Onzect 🔄 ca Konst Cede Parmettion Debt E Fet Intel Control, to 🔲 Uther 🔔 ⊊.moser 🗆 Denel 🔲 in-Kind Code Payment of Detail Returned Crystillution D Other Нигроне Oluct D 1-864 Code Payment of Debt Returned Cushibution Dote: Pequise Direct 🗍 In-Kond Code D Payment of Debt Returned Control Non 🗍 Əther 🚬 📊 Furnore SUBTOTAL THIS PAGE OF SCHEDULE B \$ 10,511.86 TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY \$ 10,511.86 (Enter total on ITEM 17a of the Summary Sheet.)