

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

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

IS THIS AN AMENDMENT? TYES 7 No

(CFA-4)
Summary Sheet

FILE NUMBER

410-23-28

TOTAL PAGES IN ENTIRE CFA-4 REPORT

9

12 I LI 12 VI VINICIA DINICIA I I I I I I I I I I I I I I I I I I	. L			
COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization) Check if this is a new n	ame			
2, Acronym or Abbreviated Name (if any)	3. Commil (219	•	one Number -3768	
Mailing Address (address where all campaign finance correspondence is received) Cr 218 DERBY STREET	neck if this is	s a new add	Iress	
5. City, State, ZIP Code MICHIGAN CITY, IN 46360		Affiliation (if a		
CANDIDATE INFORMATION (For Candidate's Can	ammittees	s Only)		
7. Full Name of Candidate (include any nickname)	3 -		lf Independen	t Candidate
DAISY LEE	DE	MOCR	AT	
9. Office Sought (Include district number, if any. Not required for exploratory committee.) CITY COUNCIL, 2ND WARD		y of Reside ORTE	nce	
TYPE OF REPORT		1	CONVENTION	CANDIDATES ONLY
11. Check one: Pre-Primary Pre-Election Annual Nomination Other			Check one: Pre-Convi	· · · ·
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement of	Organization)		Post-Con	vention
12. Reporting Period: From: 2/1/23 Through: 3/14/23		COLU This P		COLUMN B Year to Date
From: 27 1725 Through: 37 1725 13. Cash on hand and investments at the beginning of this reporting period.		0.0	0	
14. Cash on hand and investments January 1, current year.				0.00
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (use Schedule A)		3085.0	00	3085.00
15b. Unitemized				
15c. Add lines 15a and 15b in both columns SUBT	OTAL	3085.	00	3085.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	3085.0	00	3085.00
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		2143.2	9	2143.29
17b. Uniternized				
17c. Add lines 17a and 17b in both columns SUB	TOTAL	2143.2	9	2143.29
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	2143.2	9	2143.29
19. Debts OWED BY the committee (use Schedule D)				
20. Debts OWED TO the committee (use Schedule E)				7-1000-0-0
CERTIFICATION	·		-	OK OELICE AZE ONTA
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS T	RUE, CORRE	CT AND CON	IPLETE.	
Signature of Treasurer Title TREASURER	Dat	te -/13/23		IN CLERKS OFFICE
Signature of Candidate (if applicable)		te /13/23		APR 1 4 2023
WARNING: Any information contained in this report may not be object for sale or used for any commercial purpose. files a fraudulent report commits a Class D felony. (IC 3-14-13) A person who fails to file a complete or accura	(IC 3-9-4-5) A	person who k	novingly	
Thes a traudulent report commits a class o relony. (IC 3-14-1-13) A person who talls to the a commits a class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9	1-4-16, IC 3-9-4	6-17, IC 3-9-4-	and i	LLACON Sturns OF LA PORTE CIRCUIT COURT

8:40am



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

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

Itemized Contributions and Other Receipts

FILE NUMBER				
Page_	1	6of		

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 GUMULATIVE YEAR-TO-DATE	RECEIVED RECEIVED BY
1. ROB HUNT 4402 FLINT LAKE GATEWAY VALPARAISO, IN 46383	Contributions: Direct In-Kind (describe)	100.00	100.00	2/20/23
PLANNER Contributor's Occupation (# required)	Other Receipts: Interest Loan Misc. (specify)			CashApp
2. TOM COE 1528 MICHIGAN AVE LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)	5.00	5.00	2/20/23
TEACHER Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)		The state of the s	CashApp
3. DALIA ZYGAS 106 ELMWOOD DR MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)	100.00	100.00	3/7/23
UNKNOWN Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)			ActBlue
DEBI LYLES 611 SUNNYSIDE DR	Contributions: Direct In-Kind (describe)	25.00	25.00	3/10/23
MICHIGAN CITY, IN 46360 UNKNOWN	Other Receipts: Interest Loan Misc. (specify)		and the same of th	ActBlue
5. ROSEMARY EAISE 4588 MALAGA DR LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)	250.00	250.00	3/10/23
UNKNOWN Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)			ActBlue
	THIS PAGE OF SCHEDULE A	\$ 480.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

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

	F	LE NUMBER
Page _	2	of 6

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	RECEIVED RECEIVED BY
(street, number, city, state, ZiP code) 1. CHARLES KRUEGER	Contributions: Direct In-Kind (describe)	25.00	25.00	3/10/23
316 TREMONT ST MICHIGAN CITY, IN 46360	Other Receipts:			ActBlue
Contributor's Occupation (if required) UNKNOWN	Misc. (specify)			
SHARON CARNES PO BOX 43 BEVERLY SHORES, IN 46360	Contributions: Direct In-Kind (describe)	100.00	100.00	3/13/23
UNKNOWN	Other Receipts: Interest Loan Misc. (specify)			ActBlue
3. KENDALL SUMMERS-PIPKIN 3546 FRANKLIN ST MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)	25.00	25.00	3/13/23
UNKNOWN	Other Receipts: Interest Loan Misc. (specify)			ActBlue
4. BRENT BANIC 2924 TILDEN AVE MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)	25.00	25.00	3/15/23
UNKNOWN	Other Receipts: Interest Loan Misc. (specify)			ActBlue
5. ROBERT EAISE 4588 MALAGA DR LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)	100.00	100.00	3/15/23
	Other Receipts: Interest Loan Misc. (specify)			ActBlue
Contributor's Occupation (if required)	THIS PAGE OF SCHEDULE A	\$ 275.00		
TOTAL OF ALL PAGES OF SCHEDULE		\$	***	



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

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

	F	LE NUMBER	
Page_	3	of 6	1

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B GUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
MONICA LORIMER 1920 ROSLYN TR MICHIGAN CITY, IN 46360	Contributions: Oirect In-Kind (describe)	25.00	25.00	3/15/23
UNKNOWN	Other Receipts: Interest Loan Misc. (specify)		- All processing and the second secon	ActBlue
Contributor's Occupation (if required) 2. JAIDAN SMITH 1631 MONROE ST, 3 EVANSTON, IL 60202	Contributions: Direct in-Kind (describe)	25.00	25.00	3/15/23
Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)			ActBlue
JEN HARPER 1246 PRAIRIE ORCHID LN GRAYSLAKE, IL 60030	Contributions: Direct In-Kind (describe)	25.00	25.00	3/15/23
Contributor's Occupation (# required) UNKNOWN	Other Receipts: Interest Loan Misc. (specify)			ActBlue
DANIEL FRONEK 3121 SOUTH PACIFIC AVE SAN PEDRO, CA 90731	Contributions: Direct In-Kind (describe)	50.00	50.00	3/15/23
UNKNOWN Contributor's Occupation (# required)	Other Receipts: Interest Loan Misc. (specify)			ActBlue
5. ELIZABETH DECELLES 9039 LINCOLNWOOD DR EVANSTON, IL 60203-1824	Contributions: Direct In-Kind (describe)	105.00	105.00	3/15/23
UNKNOWN Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)		Total Control	ActBlue
	THIS PAGE OF SCHEDULE A	\$ 230.00		
TOTAL OF ALL PAGES OF SCHEDULE		\$		



State Form 4506 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

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

Itemized Contributions and Other Receipts

		FILE NUMI	3ER	
Page	4	of_	6	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
^{1.} BILLIE MORRIS 2005 CEDAR HILLS ST LAS VEGAS, NV 89128	Contributions: Direct In-Kind (describe)	500.00	500.00	3/15/23
LINIZALONA/AI	Other Receipts: Interest Loan Misc. (specify)			ActBlue
Contributor's Occupation (li required) UNKNOWN	Contributions:			3/16/23
THOMAS LEE 1012 N MERIDIAN RD CHESTERTON, IN 46304	Direct In-Kind (describe)	100.00	-100.00	3/10/23
UNKNOWN	Other Receipts: Interest Loan Misc. (specify)			ActBlue
3. MARTIN ZAVALA 3121 S PACIFIC AVE	Contributions: Direct In-Kind (describe)	25.00	25.00	3/18/23
SAN PEDRO, CA 90731				
	Other Receipts: Interest Loan Misc. (specify)			ActBlue
Contributor's Occupation (# required) UNKNOWN				
FRANCINE LUCHSINGER 1238 PRAIRIE ORCHID LN GRAYSLAKE, IL 60030	Contributions: Direct in-Kind (describe)	200.00	200.00	3/18/23
UNKNOWN	Other Receipts: Interest Loan Misc. (specify)			ActBlue
Contributor's Occupation (if required)				
DON BRIGGS 300 MADISON ST MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)	200.00	200.00	3/19/23
	Other Receipts:			ActBlue
UNKNOWN Contributor's Occupation (# required)	Misc. (spealiy)			, lotolide
	THIS PAGE OF SCHEDULE A	\$ 1025.00		
TOTAL OF ALL PAGES OF SCHEDULE				



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

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

Itemized Contributions and Other Receipts

	F	LE NUME	ER	
Page_	5	of	6	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
NANCY MOLDENHAUER 107 KAYE LN MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)	250.00	250.00	3/27/23
Contributor's Occupation (if required) UNKNOWN	Other Receipts: Interest Loen Misc. (specify)		man or an area of the control of the	ActBlue
ANNA LIVESAY 107 KAYE LN MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)	250.00	250.00	3/29/23
UNKNOWN Contributor's Occupation (if required)	Other Receipts; Interest Loan Misc. (specify)			DL
DENNIS BRITTAIN 506 THURMAN AV MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)	100.00	100.00	3/30/23
Contributor's Occupation (# required) UNKNOWN	Other Receipts: Interest Loan Misc. (specify)	and the second second		DL
4. AMY WISOR 305 DUPAGE ST MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)	25.00	25.00	4/7/23
UNKNOWN Contributor's Occupation (# required)	Other Receipts: Interest Loan Misc. (specify)			ActBlue
JOE FRONEK 10025 CLARK PLACE CROWN POINT, IN 46307	Contributions: Direct tn-Kind (describe)	250.00	250.00	4/12/23
UNKNOWN Contributor's Occupation (il required)	Other Receipts: Interest Loan Misc. (specify)			ActBlue
	. THIS PAGE OF SCHEDULE A	\$ 875.00		
TOTAL OF ALL PAGES OF SCHEDULE		s		



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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

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

	FIL	E NUMBER	
Page _	6	of 66	

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
TED PERZANOWSKI 110 ELMWOOD MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)	200.00	200.00	4/12/23
	Other Receipts: Interest Loan Misc. (specify)			DL
Contributor's Occupation (if required) UNKNOWN	Contributions:			
2.	Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)		A STATE OF THE STA	
Contributor's Occupation (Frequired)	Contributions:	-		
3.	Direct tn-Kind (describe)			
	Cither Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (If required)	Contributions:			
4.	☐ Direct ☐ In-Kind (describe)			
Contibulate Association (Francisco)	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (# required)	Contributions:			
	Direct In-Kind (describe)			
	Other Receipts: interest Loan Misc. (specify)		-	Anna
Contributor's Occupation (If required)				
SUBTOTAL TOTAL OF ALL O	THIS PAGE OF SCHEDULE A	\$ 200.00		
TOTAL OF ALL PAGES OF SCHEDULE, (Enter total on ITER	A ON THE LAST PAGE ONLY	\$ 3085.00		



State Form 4606 (R13/11-05) Indiana Election Commission (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 entitles OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be Itemized on this schedule.

FILE NUMBER				
Page _	1	of _	2	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF
(street, number, effy, state, ZIP code)	OFFICE SOUGHT (if applicable) PURPOSE (he specific)		PERIOD	YEAR-TO-DATE	EXPENDITURE
FAITH WALKERS 7358 W JOHNSON RD MICHIGAN CITY, IN 46360	PRINTER	Direct In-Kind Payment of Detri Returned Contribution Cother Prepare: SHIRTS	377.52	377.52	3/15/23
UNION SIGNS AND PRINTING 1 S EASTERN AVE JOLIET, IL 60433	PRINTER	Direct In-Kind Payment of Oets Returned Contribution Other Purpose: SIGNS	700.00	700.00	3/22/23
Code O HORIZON BANK 6959 W JOHNSON RD MICHIGAN CITY, IN 46360	BANK	Direct In-Kind Peyment of Debt Returned Contribution Other Purpose: SERVICE FEE	10.00	10.00	3/31/23
DALIA ZYGAS 106 ELMWOOD DR MICHIGAN CITY, IN 46360	UNKNOWN	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: BUSINESS CARDS	53.50	53.50	4/4/23
DAISY LEE 218 DERBY STREET MICHIGAN CITY, IN 46360	TEACHER	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: PARADE GIVEAWAYS	94.71	94.71	4/4/23
KEVRON PRINTING & MAILING 9831 S 78TH AVE STE F HICKORY HILLS, IL 60457	PRINTER	Direct In-Kind Peyment of Debt Returned Contribution Other Purpose: DOOR HANGERS	230.46 & SIGNS	230.46	4/7/23
MENARD'S 5260 FRANKLIN ST MICHIGAN CITY, IN 46360	HOME IMPROVEMENT	Citract In-Kind Payment of Debt Returned Contribution Other Purpose: STAKES FOR SIGNS	104.65	104.65	4/8/23
	SUBTOTAL THIS PA		\$ 1570.84		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of	E LAST PAGE ONLY the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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

FILE NUMBER				
Page	of			

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (he specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
FAITH WALKERS 7358 W JOHNSON RD MICHIGAN CITY, IN 46360	PRINTER	Ofrect In-Kind Payment of Debt Returned Contribution Other Purpose: SIGNS	572.45	949.97	4/10/23
Code		Direct In-Kind Payment of Oebl Returned Contribution Other Purpose:			
Code		☐ Cirect ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		Direct In-Kind Payment of Detrt Returned Contribution Other Purpose:			·
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			,
Code		Direct in-Kind Payment of Debt Returned Contribution Other Purposo:			
Code		Direct In-Kind Payment of Debt Raturned Contribution OtherPurpose:			
	SUBTOTAL THIS PAGE		\$ 572.45		
TOTAL OF ALL PA	GES OF SCHEDULE B ON TH		\$ 2143.29		



State Form 4506 (R17 / 8-23) Indiana Election Division (IC 3-8-5-14)

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

IS THIS AN AMENDMENT? Yes V No

(CFA-4) Summary Sheet

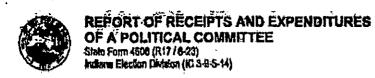
FILE NUMBER

46-23-28

TOTAL PAGES IN ENTIRE CFA-4 REPORT

7

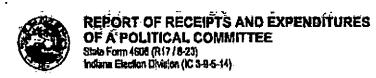
COMMITTEE INFORMAT	TON		
1. Full Name of Committee (so on Statement of Organization) Chack if this is a	new name.		
2. Acronym or Abbreviated Name ((Fany).		mittee Tolephone Numbe 9 _ 1 221-3768	· · · · · · · · · · · · · · · · · · ·
4. Mailing Address (Address where all compagn finance correspondence is received.) 218 DERBY STREET	Check if th	is is a new address,	,
5. City, State, ZIP Code MICHIGAN CITY, IN 46360	6. Park	Affiliation (If applicable) EMOCRAT	
CANDIDATE INFORMATION (For Candida	te's Committe	es Only)	
7. Full Name of Condidate (Include any nickname.)	8. Party	Affiliation or if Independ MOCRAT	ent Candidate
8. Office Sought (include district number, if any, high required for exploratory committee CITY COUNCIL, 2ND WARD		inty of Residence - APORTE	_
TYPE OF REPORT		CONVENT	ON CAMDIDATES ONLY
11. Check one: Pre-Primary Pre-Election . Armuel . Nomination . Other	· · · · · ·	Check one:	
Final / Disbanda Committee (Lines 18, 19, and 20 mins be '0'.) Outgoing Trestation (Hellin bes (14) days are	need Statement of Org	enkellan) Post-C	onvention
12. Reporting Period (mm/dd/yy):	•	COLUMN A	COLUMN 8
From: 3/15/23 Through: 10/20/23	, 1	This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	• مميسم <u>= سريعي</u>	489.86	
14: Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS			0.00
(Note: these amounts include in-kind contributions and loans, as well as cash contributions	<u>s). </u>		
15a, Itemized (Use Schedule A.)		2339.00	5424.00
, 15b, Unitemized			
16c. Add lines 15a and 15b in both columns.	SUSTOTAL	2339.00	5424.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL"		5424.00
EXPENDITURES			
(Note: These emounts include in-kind expenditures and losn repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	•	2554.36	4697.65
17b, Unitemized		• •	
17c. Add lines 17e and 17b in both columns.	SUBTOTAL	2554.36	4697.65
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both column	na) TOTAL	. 274.50	726.35
19. Debts OWED BY the committee (Use Schedule D.)	<u> </u>	- 14	
20. Debts OWED TO the committee (Use Schedule E.)	·		<u> </u>
CERTIFICATION			FOR OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIE	FIT IS TRUE, COR	RECT AND COMPLETE.	
Signature of Tressurer Title TREASURER		10/20/23	I L E D
Signature of Candidato (If applicable) Dair Le	1	Date (mm/dd/y/) 10/20/23	OCT 2 0 2023
WARNING: Any information continued in this report may not be copind for sale or used for any commercial titles a fraudulent report commits a Level 6 fationy. (IC 3-14-1-13) in person who talls to file a complete of Compaign Finance Law commits a Class B misdomeshor, (IC 3-14-1-14) and may be subject to civil paralless.	i eccarele report e	s required by the Indisho 6-4-17, IC 3-9-4-18)	2020
<u> </u>			OF LA PORTE CIRCUIT COURT



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

	FILE NUMBER	
Page	of	

CONTRIBUTOR'S FULL HAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN 5 CUMULATIVE	DATE RECEIVED from dd/vyj
(street number eny, state ZIP code)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Coftribitionis		100.00	•• •
MICHELE BARTELS	Direct	100.00	100.00	4/19/23
111 BARKER ROAD	tn-Kind (describe)			
MICHIGAN CITY, IN 46360	Other Recellots:			·
, , , , , , , , , , , , , , , , , , , ,	Interest Lean			
	Miscollenoous (specify)			ActBlue
Contributor's Decupation (Frequency) NOT EMPLOYED				
2.	Contributions:			
DUANE PARRY	Contributions: Direct	100.00	100.00	5/1/23
2206 MAPLE ST MICHIGAN CITY, IN 46360	tn-Kind (describe)	100,00		
WIGHIGAN CH 1, IN 40300	<u></u>			
	Other Receipts:			
•	Miscellaneous (apacity)			DL
Contributor's Occupation of required				
1.	Contributions:	· · · · · · · · · · · · · · · · · · ·		
EDDIE O'SULLIVAN	Contributions:	25.00	25.00	5/8/23
3 BARTON RD, RATHFARNHAM	☐ In-Kind (deacifica)	25.00	25.00	0,0,20
DUBLIN, NY D14NY71				
IRELAND	Other Receipts:	•		
	Miscelleneous (apacity)			ActBlue
Contributor's Occupation of required MUSICIAN			1	
4	Contributions:	· · · · · · · · · · · · · · · · · ·	<u> </u>	
EDDIE O'SULLIVAN	1 2	10.00	35.00	7/12/23
3 BARTON RD, RATHFARNHAM	In-Kind (describe)	10.00		1112125
DUBLIN, NY D14NY71	Otto - Consider			
IRELAND	Other Receipts: Interest: Loan		İ	
i	Miscellaneous (epicotly).			ActBlue
Contributor's Decupation of responsib				1
ge COMMUNICAL & CATABONIUM In Colomatica	Contributions:		 	
LINDSEY ELLIS	Direct	25.00	25.00	9/10/23
5805 POMMEL PL	In-IGnd (diescribe)			
WEST DES MOINES, IA	Other Recalds:			
50266	Coner Recognic			ActBlue
	Misoellaneous (apacily)			Vorbine
BANKING Contributor's Occupation of required				
	THIS PAGE OF SCHEDULE A	\$ 260.00	:	
TOTAL OF ALL PAGES OF SCHEDULE	· · · · · · · · · · · · · · · · · · ·	\$		
(Enter total on ITE	M 15a of the Summary Sheet.)] •		

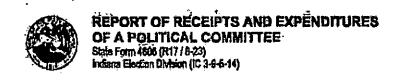


(CFA-4-SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

DISTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print tegibly IN BLACK INK sit information on this schedule, For essistance in completing this schedule, see instructions on the reverse side. This achieves be used to document considuations and receipts to the schedule, see instructions on the reverse side. This achieves contributes from individuals OVER \$100 per contributes, within a calendar year MUST be itemized on this achieves from soles, interest or other bicome) OVER \$100 per contributer, within a calendar year, attacks, returns of deposit, proceeds from soles, interest or other bicome) OVER \$100 per contributor, within a calendar year, MUST be itemized on this achieves (over \$200 if regular perty committee). A contributor's occupation is required if an individuals makes at least \$1,000 in contributions during the celendar year. Otherwise, this is optional.

Page	of	
 -		
	FILE NUMBER	

			-	
CONTRIBUTOR'S FILL MAME AND OCCUPATION FULL MAILING ADDRESS (street, number, prj. state, ZIP code)	OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN E CUMULATIVE YEAR-TO-DATE	DATE RECEIVED [mm dd ys] RECEIVED BY
SHARON CARNES PO BOX 45 BEVERYLY SHORES, IN 46301	Copyrifications: Cirrect In-Kind (describs)	100.00	200.00	9/17/23
Contributor's Occupation (Frequired) CYBER SECURITY	Other Receipts: Interest Loan Miscelleneous (specify)			ActBlue
BRIAN FORIST 601 EARL ROAD	Contributions: Direct Inskind (describe)	100.00	100.00	10/7/23
MICHIGAN CITY, IN 46360 LECTURER Contributer's Occupation (Fragulacity)	Other Receipts: Interest Loen Miscellaneolia (épolity)			DL - check
MILT DABAGIA 202 JACKPINE DRIVE MICHIGAN CITY, IN 46360	Cogiributions: Diract In-Kind (describe)	100.00	100.00	10/10/23
Contributor's Occupation (if required) CAR DEALER	Other Receipts: tribrisit Loen Miscettansous (specify)		 - - 	DL - check
NANCY MOLDENHAUER 107 KAYE LANE MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describs)	250.00		10/17/23
Gentributor's Occupation (17 sequinal)	Other Récolota: interest Loan Miscattanéous (epocity)			DL - check
5 STEVEN STANFORD 3307 KESTREL ST VALPARAISO, IN 46383	Contributions: Direct In-Kind (describe)	200.00		10/17/23
Contributor's Desupation & regulard UNKNOWN	Other Rendigle: Interest Loan Miscellaneous (specify)			DL - check
ATOTRUE	THIS PAGE OF SCHEDULE A	\$ 750.00	*	
TOTAL OF ALL PAGES OF SCHEDULE				



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

INSTRUCTIONS: LIST ORBY GONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or paint legibly IN BLACK RIK at Information on this schedule, for excistance in completing this schedule, see instructions on the revene side. This schedule is used to document contributors and receipts letsted on ITEM 154 of the Summery Sheet. All cumulative contributor, within a calendar year MUST be itemized on this schedule fover \$200, it regular party committee). All trensfore in and in-kind contributions reperfiless of enough from political action committees INIST be itemized on this schedule. All cumulative receipts, (such as less proceeds and repayments, returns, mitates, returns of disposit, proceeds than sales, trianest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
<u> </u>				
Page	of			

CONTRIBUTOR'S FULL NAME AUD FULL MAILING ADDRESS (suret, number, city, state, ZIP code)	OR OTHER RECEIPT	COLUMII A AMOUNT THIS PERIOD	COLUMII B CUMULATIVE YEAR-FO-DATE	DATE RECEIVED (1000/04/79) RECEIVED BY
MICHIGAN CITY MUNICIPAL DEMOCRATIC PAC PO BOX 8754	Contributions: Direct In-Kind (describe)	454.00	454.00	8/14/23
MICHIGAN CITY, IN 46360	Other Recolpts; Interest Losm Miscelleneous (speally)			DL check
DEMOCRATIC CIVIC CLUB 1015 WESTWOOD DR	Coptributions; Direct In-Kind (describe)	500.00	500.00	10/10/23
LAPORTE, IN 46350	Other Receipts: Interest Loan Affectioneous (specify)			DL-check
LP COUNTY DEMOCRATIC CENTRAL COMMITTEE	Contributions: Direct In-Kind (describs)	375.00	375.00	10/10/23
	Other Receipts; I teternet Loan Miscaliansous (specify)			DL check
4.	Contributions: Direct In-Kind (describe)			
	Other Roceipts: Interest Loan Loan Miscellungous (specify)			
1.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Lean Kiscellamedus (apocily)			
1	THIS PAGE OF SCHEDULE A	\$ 1329.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Shoot.)	\$ 2339.00		



Slints Form 4805 (R17 / 8-23) Indiana Election Division (IC 3-8-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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

FILE NUMBER
Page of

RECIPIENT'S HAME AND MAILING ADDRESS [Miles], House S. Civ. St. do. 215 days	PECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE 1912 PURPOSE (Companies)	COLUMN A A YOURT THIS PERIOD	COLLANS CUMULATIVE YEAR-TO-SATE	DATE OF EXPENDITURE MORE ACTIVITY
DAISY LEE 218 DERBY STREET MICHIGAN CITY, IN 46360	TEACHER	Office In-Kind Proyects of Orbit Reduced Contribution Office Projects:	450.00	544.71	4/27/23
HORIZON BANK 6959 W JOHNSON RD MICHIGAN CITY, IN 46360	BANK	Direct In-Kitch Peryment of Debt Rechmed Contribution Other Purpose:	10.00	20.00	4/28/23
STAPLES 2106 MORTHLAND DR VALPARAISO, IN 46383	OFFICE SUPPLY	Dipact In-Mins Physmeni of Debt Returned Contribution Other Purpose:	53.50	53.50	5/25/23
HORIZON BANK 6959 W JOHNSON RD MICHIGAN CITY, IN 46360	BANK	Direct in the first in the firs	10.00	30.00	5/31/23
PFLAG PO BOX 8503 MICHIGAN CITY, IN 46360	CHARITY	Direct trilicad Paymont of Debt Refurred Contribution Other Porpose:	100.00	100.00	6/14/23
BUSY BEAVER BUTTONS 3407 W ARMITAGE AVE CHICAGO, IL 60647	PRINTER	Otheri In-Kind Payment of Debt Referenced Contribution Other Purpose:	205.07	205.07	6/15/23
FAMILY EXPRESS 5822 FRANKLIN ST MICHIGAN CITY, IN 46360	GAS STATION	Okact linkind Payment of Dabt Refurned Contribution Other Purposia;	16.54	16.54	6/20/23
	SUBTOTAL THIS PAGE OF SCHEDULE B				
TOTAL OF ALL PA	\$ 845.11 \$				



Side Form 4505 (R17 / 6-23) 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 complating this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summitry Sheet. All cumulative expenses paid to individuate, businesses, labor organizations and other entities OVER \$100 per raciplant, within a calendar year MUST to itemized on this achedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from cardidate, legislative occurs, political action, or regular party committees) MUST be itemized on this schedule.

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· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · ·			
RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENTS OCCUPATION	TYPE OF EXPENDITURE	COLUMNIA	COLUMB	DATE OF
(street, marker, elly state, 219 code)	OFFICE SOUGHT (if applicable)	and PURPOSE (ne apacific)	AMOUNT THIS PENIOD	CUMULATIVE YEAR-TO-BATE	EXPENDITURE (minutal pp)
Code O HORIZON BANK	BANK	Direct In-Kind Payment of Daily!	10.00	40.00	6/30/23
6959 W JOHNSON RD MICHIGAN CITY, IN 46360		CotherPurpose:			
HORIZON BANK 6959 W JOHNSON RD	BANK	Direct In-Kind Payment of Debt Returned Contribution	10.00	50.00	7/30/23
MICHIGAN CITY, IN 46360		Other Purpusit			
Code O HORIZON BANK 6959 W JOHNSON RD	BANK	Direct in-Kind Phymens of Dabb Returned Contribution	10.00	60.00	8/30/23
MICHIGAN CITY, IN 46360		Cliner			:
SCOTTY'S 3409 FRANKLIN ST	AWARDS	Ointol : In-Hind Payment of Debt Refurned Contribution	222.56	222.56	9/18/23
MICHIGAN CITY, IN 46360		Ослаг			
FIDDLEHEAD 422 FRANKLIN ST	RESTAURANT	Others In-lOnd Payment of Debit Raturned Contribution	47.58	47.58	9/18/23
MICHIGAN CITY IN, 46360		Purpose:			
Code O FRANKLIN PLANNER	PRINTER	Diest in Kind Payment of Debt Refurned Confidention	186.50	186.50	9/22/23
2250 WEST PARKWAY BLVD SALT LAKE CITY, UT 84119		OlherPurpose:			
HORIZON BANK	BANK	Otrect In-Kind Payment of Debt Returned Contribution	10.00	70.00	9/29/23
6959 W JOHNSON RD MICHIGAN CITY, IN 46360		OPut Purpose:			
· · · · · · · · · · · · · · · · · · ·	SUBTOTAL THIS PAGE OF SCHEDULE B				
TOTAL OF ALL PA	GES OF SCHEDULE B ON TH	E LAST PAGE ONLY	\$ 496.64 \$		
	! *				



State Form 4606 (R17 / 8-23) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK RNK all information on this schedule. For essistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17g of the Summary Sheet. All committee expenses paid to individuals, businesses, labor organizations and other entitles OVER \$100 per feelplant, within a calendar year MUST be itemized on this achorum (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, togislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE NUMBER	
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FECIPIENT S HALLE AND MAILING ADDRESS (street, mumber, only, state, 219 code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (II applicable)	TYPE OF FXPENDITURE and PURPOSE (De specific)	COLUMB A AMOUNT THIS PERIOD	COLUMNIS CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (minulatory)
SCOTTY'S 3409 FRANKLIN ST MICHIGAN CITY, IN 46360	BUSINESS	Direct. In-Kind Payment of Ook! Furturned Contribution Other Purpose;	35.61	258.17	10/6/23
HORIZON BANK 6959 W JOHNSON RD MICHIGAN CITY, IN 46360	BANK	Direct in-Kind Payment of Oath! Returned Contribution Other Purpositi	37.00	97.00	10/10/23
UNION SIGNS & PRINTING 1 S EASTERN AVE JOLIET, IL 60433	PRINTER	Office: In-Kind Performent of Debt Returned Contribution Officer Pulpose:	1140.00	1840.00	10/17/23
Code		Direct In-Knot Referent of Osekt Referend Contribution Other Pulposoc	:		-
Code		Direct in-Kind Prignant of Beb! Returned Contribution Other Purpose:			
Code		Ditect tri-Kind Payment of Debt Returned Contribution Other Pulpose:			
Code		Direct			
		GE OF SCHEDULE B	\$ 1212 <u>.6</u> 1		
TOTAL OF ALL P	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17e of		\$ 2554.36		





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

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

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

]	FILE NUMBER
1. IS THIS AN AMENDMENT?	☐ Ye	s 🗹 No If Y	es, plea:	se enter the	file n	umber in this	box. →	46-23-28
SECTION A. CANDIDATE	INFO	RMATION: F	ill in ali	applicabl	e box	es as fully a	nd accur	ately as possible.
2. Last Name		irst Name		Middle Name		Nickname		3. Type of Committee (Check one)
Lee		Daisy						☑ Candidate's Principal Committee☐ Exploratory Committee
4. Mailing Address (number and street, city,	state, and	ZIP code)		5. F	AX (Opt	ional)	6. E-m	ail Address (Optional)
218 Derby Street				,	٠			
7. City	State	ZIP Code	8. Co	unty		9. Telephone (D	ay)	10. Telephone (Evening)
Michigan City	IN	46360	LaF	orte		,219, 221-3	3768	
11. Party Affillation	12. Office Sought (Include district number, if any. Not required for an exploratory committee						Not required for an exploratory committee.)	
☑ Democratic ☐ Libertarian ☐ Repu						- 2nd Ward		
					e box	es as fully a	nd accu	rately as possible.
13. Full Name of Committee (Do not abi		.) Check if this	is a new n	ame.				
Committee to Elect Daisy L								
14. Mailing Address (number and street, city	, state, a	nd ZIP code) 🔲 Che	eck if this is	a new address	. 15. FA	X (Optional)	16. E-⊓	nail Address (Optional)
17. City	State	ZIP Code	18. C	ounty	11	19. Telephone		20. Committee Organization Date (mm/dd/yy)
21. Chairperson's Full Name Des	ignate (Candidate as Chairp	erson.	Check if this	s a new	chairperson.		
22. Mailing Address (number and street, city	, state, a	nd ZIP code) 🔲 Che	ck if this is	a new address	. 23. F#	X (Optional)	24. E-n	nail Address (Optional)
25. City	State	ZIP Code	26. C	ounty		27. Telephone (I	Day)	28. Telephone (Evening)
•						()		
29. Bank or Other Depositories (List all 30. Exploratory Committee (Give brief state				nmittee only } [3:	Saladi	s and Reimburs	ments (Will	ty deposit boxes or maintains funds.) the committee pay the candidate a salary or ach a copy of the contract.) Yes No
				0 4 44)				
	NTO	F TREASURE	K (IC 3	-9-1-14)		Sion	ture of the	Committee Chairperson
committee, appoint the followin Treasurer of the Committee.	g per	Bob Le	e				Jain	1 da
33. Treasurer's Full Name Design	ate car	didate as treasurer.	☑ Che	ck if this is a ne	w treasu	er.		7
Robert E. Lee								
34. Mailing Address (number and street, cit)	, state, a	nd ZIP code) 🔲 Che	ock if this is	a new address	. 35. F/	X (Optional)	"	mall Address (Optional)
1238 Prairie Ochid Lane					()	REL	.ee747@gmail.com
37. City	State	ZIP Code	38. C	ounty		39. Telephone (40. Telephone (Evening)
Grayslake	1L	60030	Lak	æ		(312 ₎ 213-9	9256	(312 ₎ 213-9256
SECTION D. ACCEPTANG	CE O	APPOINTME	ENT (IC	3-9-1-15)				
41 I give notice that I accept	the di	rties and respon	nsibilities	of Treasur	er of 1	his Signature	of Person /	Accepting Appointment
Committee. I am not the chair	person	of a campaign	finance	committee (except	as /	Cont-	E Fee
permitted for a candidate commit SECTION E. CERTIFICAT	tee un	DE STATEME	NT					FOR OFFICE USE ONLY
We certify as the candidate an	d the	duly appointed	Chairne	rson of the	Сотп	ittee and that	we have	77 77
examined this statement. To the t	est of	our knowledge a	and belief	f it is true, co	rrect a	nd complete.		
42. Typed or Printed Name of Cha	irpers	on Signature	of Chair	person		Date (mm	/dd/yy)	IN CLERKS OFFICE
Daisy Lee		Ha	نقدر ک	×ω.		1/1	4/24	
43. Typed or Printed Name of Car	didate	Signature	or Cand			Date (mm	/dd/yy)	JAN 15 2024
Daisy Lee		20	سقم ز	Lee			4/24	
Warning: State law requires that any	change	in this information t	e reported	within ten (10) days	of the change (IC	3-9-1-10). A	L. Commission of the contract
person who knowingly files a fraudulent accurate report as required by the India	ana Car	npaign Finance Lav	v commits	a Class B mis	demeand	r (IC 3-14-1-14),	and may be	LLACHU CITURNS CLERK OF LA PORTE CIRCUIT COURT
subject to civil penalties (IC 3-9-4-16, IC	3-9-4-1	7, and IC 3-9-4-18).						L CLUNCY



State Form 4606 (R17 / 8-23) Indiana Election Division (IC 3-9-5-14)

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

IS THIS AN AMENDMENT? Yes V No

(CFA-4) Summary Sheet

FILE NUMBER

40-23-28

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION	/. V. t 		
Full Name of Committee (as on Statement of Organization) Check if this is a new recommittee to Elect Daisy Lee Committee to Elect Daisy Lee	name.		
2. Acronym or Abbrevlated Name (if any)	3. Com	mittee Telephone Numb 9) 221-3768	er
Mailing Address (Address where all campaign finance correspondence is received.) 218 Derby Street	heck if t	nis is a new address.	
5. City, State, ZIP Code Michigan City, IN 46360	6. Part Demo	y Affiliation <i>(if applicable)</i> ocrat	
CANDIDATE INFORMATION (For Candidate's C	ommitt	ees Only)	
7. Full Name of Candidate (Include any nickname.) Daisy Lee	8. Part Dem	y Affiliation or If Independ ocrat	dent Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Michigan City - City Council, 2nd Ward	10. Co LaPo	unty of Residence orte	
TYPE OF REPORT		CONVENT	ION CANDIDATES ONLY
11. Check one: Pre-Primary Pre-Election Annual Nomination Other			onvention
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend State	ement of Or	ganization.)	convention
12. Reporting Period (mm/dd/yy): From: 10/21/23 Through: 12/31/23		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		441.9	4
14. Cash on hand and investments January 1, current year.			0.00
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		25.0	0 5,449.00
15a. Itemized (Use Schedule A.)		25.0	0 5,449.00/
15b. Uniternized		25.0	0 5,4
roc. Add and roc modern common	TOTAL		 "
10. Add lines to and too in Coldins to the Coldins	TOTAL	466.9	4
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)		251.7	8 4,949.43
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		231.7	4,545.40
17b. Unitemized	TOTAL	251.7	4,949,43
170. Add 18100 174 3.74 17 18 18 18 18 18 18 18 18 18 18 18 18 18	····	215.1	:
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	210.1	_/ OTTO
19. Debts OWED BY the committee (Use Schedule D.)			
20. Debts OWED TO the committee (Use Schedule E.)			
CERTIFICATION			FOR OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TO Signature of Treasurer Title Treasurer		Date (mm/dd/yy) 1/13/24	FILED IN CLERKS OFFICE
Signature of Candidate (# applicable) WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who falls to file a complete or accurately accommits a level 6 felony.	(IC 3-9-4-	Date (mm/dd/yy) 1/14/24 5) A person who knowingly as required by the Indiana	JAN 15 2024
Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9	4-16, IC 3	-9-4-17, IC 3-9-4-18)	LILAGIU STUENS CLERK OF LA PORTE CIRCUIT COURT



State Form 4606 (R17 / 8-23) Indiana Election Division (IC 3-9-5-14)

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

Itemized Contributions and Other Receipts

FILE NUMBER					
-					
Page	of				

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. Rosemary Eaise 4588 West Malaga Dr. LaPorte, IN 46350	Contributions: Direct In-Kind (describe)			10/22/23
	Other Receipts: Interest Loan Miscellaneous (specify)	\$25.00		ActBlue
Contributor's Occupation (if required) NIPSCO manager	, and			
2.	Contributions: Direct In-Kind (describe)	,		
	Other Receipts: Interest Loan Miscellaneous (specify)			1
Contributor's Occupation (if required)				
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
5.	Contributions: Direct In-Kind (describe)		The second secon	
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$ 25.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITER	A ON THE LAST PAGE ONLY I 15a of the Summary Sheet.)	\$ 25.00		



State Form 4606 (R17 / 8-23) 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.

F	ILE NUMBER	
Page	of	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city. state, ZIP code) OFFICE SOUGHT (if applicable)		TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code O Menards 5260 Franklin St.	Office Supplies	Direct In-Kind Payment of Debt Returned Contribution	\$44.13	\$44,1 3	11/27/23
Michigan City, IN 46360	\$144.12 - \$99.99(RETURN)	Other	ψ11.10	4 71,10	
Code O Horizon Bank 6959 W. Johnson Rd. Michigan City, IN 46360	Bank Fee	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$10.10	\$107.00	10/31/23
Code O Horizon Bank 6959 W. Johnson Rd.	Bank Fee	☑ Direct	\$10.00	\$117.00	11/30/23
Michigan City, IN 46360		Purpose:	·		жение помента помента в помента
Code O Horizon Bank 6959 W. Johnson Rd.	Bank Fee	Direct In-Kind Payment of Debt Returned Contribution Other	\$10.00	\$127.00	12/31/23
Michigan City, IN 46360		Purpose:			
Code O Walgreens 101 US20	Office Supplies	Direct In-Kind Payment of Debt Returned Contribution	\$72.06	\$72.06	10/23/23
Michigan City, IN 46360		Other Purpose:	Ç . L .		
Code O ActBlue.com	Processing Fee	Direct In-Kind Payment of Debt Returned Contribution Other	\$1.16	\$1.16	10/25/23
		Purpose:			
Code A Hawkin's Print Shop 315 Lincolnway LaPorte, IN 56350	Campaign Literature	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other	\$104.33	\$104.33	10/25/23
Larone, IN 30330		Purpose:			
	\$ 251.78				
TOTAL OF ALL PA	\$ 251.78				