



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.

												FILI	E NUMB	ER
1. IS THIS AN AMENDMENT?											L	<u> </u>	3-4	3
SECTION A. CANDIDATE				in all			e box	es as			ccur			
2. Last Name		First Na	ne		Middle N	ame			Nicknar	me				(Check one)
Wojcik		Shan	non									1 - ' '	date's Princip atory Commi	al Committee
4. Mailing Address (number and street, city,	state, ai				l	5. F/	XX (Opt	ional)	L	10	6. E-ma	il Address (Opt		
2024 Goldengate Drive			•									non.w.wojo		Lcom
7. City	Stat	e 7	IP Code	8. Cou	untv	Ц		g. Tel	ephone ((Day)			ne (Evening)	
Long Beach	IN	~ -	46360	1	orte			1	•	3-7925		,773, 20		
11. Party Affiliation	L			Lui		Hice	Sough					Not required for		ory committee 1
☐ Democratic ☐ Libertarian ☐ Repul	blican	Other	Independa	nt			Counc		ac a.c	A TIGITIDO	,	riorregunou ioi	an explorate	,, commintos,,
SECTION B. COMMITTEE					applic	able	e box	es as	s fullv	and a	ccur	ately as po	ssible.	····-
13. Full Name of Committee (Do not abl Committee to Elect Shanno	breviat	(e.)												
14. Mailing Address (number and street, city			le) 🔲 Check i	f this is	e new add	reeq	15 FA	¥ (Ont	ional)	14	16. F-m	all Address (O	ntionel)	
2024 GoldenGate Drive	, olulo,	and En oct	io, Li chicari		u uuu	.,			2011417	1		non.w.wojo	•	l com
17. City	State	<u>, </u>	IP Code	18. Cc	nuntv		<u> </u>) 19. Te	lephone		Onlan	20. Committe		
Long Beach	IN	1	46360	į.	orte			i e	3, 209			(mm/dd/yy)	07/10	
					Check if	Outa ta		\	,	-1 320			07711	<i></i>
21. Chairperson's Full Name 😿 Des	gnate	Carioloa	e as Chairperso	<u>الله</u>	CHECKIII	LI 113 13	anew	cuanbe	nson.					
22. Mailing Address (number and street, city	, state,	and ZIP cod	le) 🗋 Check i	f this is	a new add	ress.	23. FA	X (Opt	ional)	2	24. E-m	all Address (O	otional)	
25. City	State	Z	iP Code	26. Cd	ounty		13	27. Te	elephone	(Day)		28. Telepho	ne (Evening,	}
29. Bank or Other Depositories (List all	banks	orother	denositories in w	hich the	e committe	e dec	osits fu	nds ho	olds acco	unts ren	ts safet	v deposit boxes	or maintains	funds.)
Horizon Bank												,,		-
30. Exploratory Committee (Give brief state	ement e	exolaining o	uroose of an explon	atory corr	nmittee only 1	31.	Satarie	s and	Reimbu	rsements	s (Will t	he committee pa	v the candid	ate a salary or
						reir						ch a copy of the		
SECTION C. APPOINTME	NT (DE TR	ASHRER	(IC 3-	9-1-14)									
32. I, as Chairperson of the									Sig	natyre o	f the C	ommittee Chai	rperson	
committee, appoint the following											`~	~_		
Treasurer of the Committee. 33. Treasurer's Full Name Design	ate ca	ndidete e	s treasurer.	1 Chec	k if this is a	naw	traceur	or		4	0			
33. Iteasurer's rule raine El Design	ale ca	iiiuiuate a	s neasoner. L	1 Cliec		3 11679	li casul	GI.						
34. Mailing Address (number and street, city	state.	and ZIP cod	e) 🔲 Check i	f this is	a new add	ress.	35. FA	X (Opt	tional)	13	36. E-m	all Address (O	otional)	
(, 0.2.0,		,										,	
37. City	State	e Z	IP Code	38. Co	ounty		Щ) 39. Te	elephone	(Day)		40. Telepho	ne (Evening)	
		_ _						,		,,,,				
SECTION D. ACCEPTANO		E A DE	CINITMEN	F /IC	2.0.1.1	5)			·		•	j()		
41. I give notice that I accept							roft	his S	lanatur	e of Per	son A	ccepting App	ointment	
Committee. I am not the chairs permitted for a candidate committee.	erso	n of a	campaign fin	ance	committe	e (e	xcept	as						
SECTION E. CERTIFICAT	_											FOR OF	FICE USE	ONLY
We certify as the candidate an	d the	duly a	appointed Ch	airper	son of	the (Comm	ittee	and the	at we l	have			
examined this statement. To the b	est o	f our kn	owledge and	belief	it is true	, cor	rect ar	nd cor	nplete.		4	IN CLE	rks off	ICE 7
42. Typed or Printed Name of Cha	irper	son	Signature of	Chairp	person				Date (m	nm/dd/yy)				
											Ш	.1111	1 2 202	23
43. Typed or Printed Name of Can	didat	e	Signature of	Candi					Date (m	nm/dd/yy)		002	,	
Shannon Wojcik]	1	2/	a				7.	/10/23				
Warning: State law requires that any o	hange	in this in	nformation be re	ported	within ten	(10)	days o	f the c	hange //	C 3-9-1-1	IOL A		nu Stud	
person who knowingly files a fraudulent	report	commits	a Level 6 D fel	ony (IC	3-14-1-13). A p	erson v	who fai	is to file	a comple	ete or l	CLERK OF LAP	ORTE CIRCL	IIT COURT
accurate report as required by the india subject to civil penalties (/C 3-9-4-16, /C				inints 8	URSE D	msae	aneano	110 3	-14-1-14)	,, and m	ay UU			



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

√ No

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

4

CLERK OF LA PORTE CIRCUIT COURT

COMMITTEE INFORMATION					
1. Full Name of Committee (as on Statement of Organization) Check if this is a new Committee to Elect Shannon Wojcik	name.				
2. Acronym or Abbreviated Name (if any) 3. Committee			hone Number 7925		
4. Mailing Address (Address where all campaign finance correspondence is received.) 2024 GoldenGate Drive	heck if this	s is a new a	address.		***************************************
5. City, State, ZIP Code Long Beach, IN 46360	6. Party	Affiliation (i	f applicable)		
CANDIDATE INFORMATION (For Candidate's C	ommittee	es Onlv)			
7. Full Name of Candidate (<i>Include any nickname.</i>) Shannon Wojcik		Affiliation o	r If Independent	Candidate	
Office Sought (Include district number, if any. Not required for exploratory committee.) Long Beach Town Council	10. Cour LaPort	nty of Resid	lence		
TYPE OF REPORT		Ï	CONVENTION	CANDIDATES (DNLY
11. Check one: □ Pre-Primary □ Pre-Election ☑ Annual □ Nomination □ Other □ □ Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) □ Outgoing Treasurer (Within ten (10) days amend State	ement of Organ	nization.)	Check one: Pre-Conve	•	
12. Reporting Period (mm/dd/yy):			UMN A	COLUMN E	
From: August 14,2023 Through: November 7, 2023			Period	Year to Dat	
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 loans, as well as cash contributions.)					
15a. Itemized (Use Schedule A.)			1,212.44	1,2	12.44
15b. Unitemized					
15c. Add lines 15a and 15b in both columns.	TOTAL				
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL		1,212.44	1,2	12.44
EXPENDITURES					
(Note: These amounts include in-kind expenditures and loan repayments.)					
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			1,212.44	1,2	12.44
17b. Unitemized			0.00		0.00
17c. Add lines 17a and 17b in both columns.	TOTAL		1,212.44	1,2	12.44
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL		0.00		0.00
19. Debts OWED BY the committee (Use Schedule D.)			0.00		
20. Debts OWED TO the committee (Use Schedule E.)			0.00		
CERTIFICATION			FC	OR OFEICE USE:	NLY-
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS T	RUE. CORRI	ECT AND CO	MPLETE. I	OR OFFICE USE G	,
Signature of reastree World Candidate	1	ate (mm/dd 11/21/2	(yy) IN CLE 2023	RKS OFFICE	
Signature of Candidate (if applicable)	Da	ate <i>(mm/dd</i> 11/21/2	(yy) 1023 NOV	2 1 2023	

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly 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 as required by the Indiana-

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)



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

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INX all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. 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	2	of	4					

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)	OR OTHER REGER T	PERIOD	YEAR-TO-DATE	RECEIVED BY
Shannon Wojcik, Self 2024 GoldenGate Drive	Contributions:			
Long Beach, fN 46360	☐ In-Kind (describe)			10/26/2023
	Other Receipts: Interest Loan Miscellaneous (specify)	\$712.44	\$712.44	Shannon Wojcik
Contributor's Occupation (if required)				
	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)		<u>-</u>		<u>.</u>
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: tnterest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
5.	Contributions: Direct In-Kind (describe)			
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)			
, , , ,	THIS PAGE OF SCHEDULE A	\$ 712.44		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$ 712.44 \$ 712.44		
(Enter total on ITEM	15a of the Summary Sheet.)	F 12.77		



State Form 4606 (R17 / 8-23) 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).

	FIL	E NUME	BER	
Page _	3	of	4	

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
Miss Print 8244 Calument Avenue Munster, IN 46321	Contributions: ☐ Direct ☑ In-Kind (describe) Yard signage	\$277.50	\$277.50	10/26/2023
	Other Receipts: Interest Loan Miscellaneous (specify) Discount	\$277.50	Ψ211.30	Shannon Wojcik
2. Miss Print 8244 Calument Avenue Munster, IN 46321	Contributions: ☐ Direct ☑ In-Kind (describe) Mailing copies			09/28/2023
	Other Receipts: ☐ Interest ☐ Loan ☑ Miscellaneous (specify) ☐ Discount	\$222.50	\$222.50	Shannon Wojcik
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL	. THIS PAGE OF SCHEDULE A	\$ 500.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.)	\$ 1,212.44		



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.

FILE NUMBER							
Page _	4	_ of	4				

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code A United States Postal Service	Post Office	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	\$462.00	\$462.00	10/18/2023
	Town Council	Other Purpose: postage for mailer	\$ 10Z.00	\$402.00	10/10/2020
Code A Miss Print-Copies of Mailer	Printer	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	* 222 20	# 200.00	40/06/0003
	. Town Council	Other Purpose: mailer copies	\$289.86	\$289.86	10/26/2023
Code A Miss Print-Yard Signs	Printer	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution			
	Town Council	Other Purpose: Yard signage	\$460.58	\$460.58	9/28/2023
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other			
		Purpose:			
Code	,	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B					
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)					



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? Tyes V No.

(CFA-4) Summary Sheet

FILE NUMBER
40-23-43
TOTAL PAGES IN ENTIRE CFA-4 REPORT
4

	l		
COMMITTEE INFORMATION	ON		
Full Name of Committee (as on Statement of Organization) Committee to Elect Shannon Wojcik Check if this is a new committee to Elect Shannon Wojcik	new name.		
2. Acronym or Abbreviated Name (if any)		mmittee Telephone Number	ər
		73) 209-7925	
Mailing Address (Address where all campaign finance correspondence is received.) 2024 GoldenGate Drive	Check if	this is a new address.	
5. City, State, ZIP Code Long Beach, IN 46360	6. Pa	rty Affiliation (if applicable)	
CANDIDATE INFORMATION (For Candidate	's Commit	tees Only)	
7. Full Name of Candidate (Include any nickname.)		rty Affiliation or If Independ	lent Candidate
Shannon Wojcik		ependent	
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Long Beach Town Council		ounty of Residence Porte	
TYPE OF REPORT		CONVENT	ION CANDIDATES ONLY
11, Check one:		Check one:	
☐ Pre-Primary Pre-Election		Pre-Co	onvention .
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Dutgoing Treasurer (Within ten (10) days amen	od Statement of C	Organization.) Dost-C	onvention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: August 14,2023 Through: November 7, 2023		This Period	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 loans, as well as cash contributions.)		1,212.4	4 1,212.44
15a. Itemized (Use Schedule A.)		1,212.4	1,212.44
15b. Unitermized 15c. Add lines 15a and 15b in both columns. \$	UBTOTAL		
	TOTAL	1,212.44	1,212.44
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. EXPENDITURES	IOIAL	1,212.4	1,2(2.44
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		1,212.44	4 1,212.44
17b. Unitemized		0.00	
	SUBTOTAL		
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)			
19. Debts OWED BY the committee (Use Schedule D.)	,	0.00	0
20. Debts OWED TO the committee (Use Schedule E.)		0.00	
201 Ballo Citi 20 110 till committee (200 Committee 22)			
CERTIFICATION			FOR OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT Signature of Treasurer Title	r is true, co	Date (mm/dd/yx)	
Signature of treasurer World Candidate		11/21/2023	IN CLERKS OFFICE
Signature of Candidate (if applicable)		Date (mm/dd/yy)	
splannon Work		11/21/2023	JAN 12 20 24
WARNING: Any information contained in this report may not be opied for sale or used for any commercial purifiles a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or a	ccurate report	as required by the Indiana	 -
Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (II	C 3-9-4-16, IC	3-9-4-17, IC 3-9-4-14)	Lleaver Stevens
		CIED	EXCEPTION CONTRACTOR



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

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

	FILE	NUMBE	R	
Page	2	of	4	

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
Shannon Wojcik, Self 2024 GoldenGate Drive Long Beach, IN 46360	Contributions: Direct In-Kind (describe)	TEMOS		10/26/2023
	Other Receipts: Interest Loan Miscellaneous (specify)	\$712.44	\$712.44	Shannon Wojcik
Contributor's Occupation (if required)			<u> </u>	
2	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
3.	Contributions: Direct In-Kind (describe)			
. Contributor's Occupation (il required)	Other Receipts: Interest Loan Miscellaneous (spediy)			
4.	Contributions:			
	☐ Direct ☐ In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)		 	
Contributor's Occupation (if required)				
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$ 712.44		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITER	A ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$ 712.44		



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

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

Itemized Contributions and Other Receipts

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

	FILE NUMBER						
Page	3	of	4				

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION		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. Miss Print 8244 Calument Avenue Munster, IN 46321	Contributions: Direct In-Kind (describe) Yard signage	\$277.50	\$277.50	10/26/2023
	Other Receipts: Interest Loan Miscellaneous (specify) Discount	Φ211.30	\$277.30	Shannon Wojcik
Miss Print 8244 Calument Avenue Munster, IN 46321	Contributions: Direct In-Kind (describe) Mailing copies	\$222.50	6222 50	09/28/2023
	Other Receipts: Interest Loan Miscellaneous (specify) Discount	\$222.50	\$222.50	Shannon Wojcik
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			:
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 500.00		
TOTAL OF ALL PAGES OF SCHEDULE		\$ 1,212.44		



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.

FILE NUMBER						
Page _	4	of	4			

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code A United States Postal Service	Post Office	Direct In-Kind Payment of Debt Returned Contribution Other	\$462.00	\$462.00	10/18/2023
	Town Council	Purpose: postage for mailer	·		
Code A Miss Print-Copies of Mailer	Printer	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other	\$289.86	\$289.86	10/26/2023
	Town Council	Purpose: mailer copies	,	, 	
Code A Miss Print-Yard Signs	Printer	☐ Direct ☐ tn-Kind ☑ Payment of Debt ☐ Returned Contribution	\$460.58	\$460.58	9/28/2023
	Town Council	Other Purpose: Yard signage	• • • • • • • • • • • • • • • • • • • •	***************************************	
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAGE	GE OF SCHEDULE B	\$ 1,212.44		·
TOTAL OF ALL P	AGES OF SCHEDULE B ON TH	E LAST PAGE ONLY	\$ 1,212.44		



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? Tyes V No

(CFA-4) Summary Sheet

FILE NUMBER

UO-23-43

TOTAL PAGES IN ENTIRE CFA-4 REPORT

		· · · · · · · · · · · · · · · · · · ·	
COMMITTEE INFORMATION			
Full Name of Committee (as on Statement of Organization) Check if this is a new Committee to Elect Shannon Wojcik Check if this is a new Committee to Elect Shannon Wojcik Check if this is a new Committee to Elect Shannon Wojcik	name.		
2. Acronym or Abbreviated Name (if any)	3. Committee 7	Telephone Number	
	(773) 2	209-7925	
4. Mailing Address (Address where all campaign finance correspondence is received.) 2024 GoldenGate Drive	Check if this is a r	new address.	
5. City, State, ZIP Code Long Beach, IN 46360	6. Party Affiliati	ion (if applicable)	
CANDIDATE INFORMATION (For Candidate's C	Committees On	ly)	
7. Full Name of Candidate (Include any nickname.)	1	ion or If Independent	Candidate
Shannon Wojcik	Independer	nt	
9. Office Sought (include district number, if any. Not required for exploratory committee.)	10. County of F	Residence	
Long Beach Town Council	LaPorte		
TYPE OF REPORT			CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conve	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend Sta	tement of Organization.)	Post-Conve	ention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: August 14,2023 Through: November 7, 2023		This Period	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.		<u></u>	0.00
CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		1,212.44	1,212.44
15b. Uniternized			
15c. Add lines 15a and 15b in both columns.	TOTAL		
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	1,212.44	1,212.44
EXPENDITURES	,		
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		1,212.44	1,212.44
17b. Unitemized		0.00	0.00
17c. Add lines 17a and 17b in both columns.	STOTAL	1,212.44	1,212.44
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	0.00	0.00
19. Debts OWED BY the committee (Use Schedule D.)		0.00	
20. Debts OWED TO the committee (Use Schedule E.)		0.00	
CERTIFICATION	•	FO	R OFFICE USE ONLY
CERTIFICATION I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	TRUE, CORRECT AN		I L E D
Signature of Preasure Title	Date (mi	m/dd/yy) IN	CLERKS OFFICE
E Name Worlik Candidate	11/2	21/2023	
Signature of Candidate (if applicable)	Date (mi	m/dd/yy)	IAN 10 ooos
WARNING: Any information contained in this report may not be popied for sale or used for any commercial purpose			JAN 12 20 24
files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accur	ate report as require	d by the Indiana	
Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-5	9-4-16, IC 3-9-4-17, IC		floory Stevens
		L <u>Clerk o</u>	F LA PORTE CIRCUIT COL



(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, rebutes, 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	2	of	4	

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. Shannon Wojcik, Self	Contributions:	FERIOD	ILAROIO-BAIL	
2024 GoldenGate Drive	Direct			4.5.10.0.10.00.0
Long Beach, IN 46360	in-Kind (describe)			10/26/2023
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$712.44	\$712.44	Shannon Wojcik
2.	Contributions:			
	Direct			
	n-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)			ļ	
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 712.44		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$ 712.44		



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

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

Itemized Contributions and Other Receipts

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

FILE NUMBER					
Page _	3	of	4		

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION		COLUMN B	DATE RECEIVED
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	YEAR-TO-DATE	(mm/dd/yy) RECEIVED BY
1. Miss Print 8244 Calument Avenue Munster, IN 46321	Contributions: Direct In-Kind (describe) Yard signage	\$277.50	\$277.50	10/26/2023
	Other Receipts: Interest Loan Miscellaneous (specify) Discount	\$277.50	φ2/7.30	Shannon Wojcik
Miss Print 8244 Calument Avenue Munster, IN 46321	Contributions: Direct In-Kind (describe) Mailing copies	#000 F0	\$200 E0	09/28/2023
	Other Receipts: Interest Loan Miscellaneous (specify) Discount	\$222.50	\$222.50	Shannon Wojcik
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTA	L THIS PAGE OF SCHEDULE A	\$ 500.00		
TOTAL OF ALL PAGES OF SCHEDUL (Enter total on IT)	E A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet.)	\$ 1,212.44		



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.

FILE NUMBER					
Page	4	of	4		

RECIPIENT S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code A United States Postal Service	Post Office	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution	\$462.00	\$462.00	10/18/2023
	Town Council	Other Purpose: postage for mailer	V102.00	\$ 702.00	10/10/2020
Code A Miss Print-Copies of Mailer	Printer	☐ Direct ☐ tn-Kind Payment of Debt ☐ Returned Contribution	£220.06	#200 ac	40/26/2022
	Town Council	Other Purpose: mailer copies	\$289.86	\$289.86	10/26/2023
Code A Miss Print-Yard Signs	Printer	Direct In-Kind Payment of Debt Returned Contribution	\$460.58	\$460.58	9/28/2023
	Town Council	Other Purpose: Yard signage	φ 1 00.30	\$ 4 00.30	3/20/2023
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B					
TOTAL OF ALL PA	AGES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$ 1,212.44 \$ 1,212.44		