



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4806 (R15/5-19)

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

(CFA-4)

## Summary Sheet

FILE NUMBER

46-24-49

TOTAL PAGES IN ENTIRE CFA-4 REPORT

**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

### COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name. <i>COMMITTEE TO ELECT JIM SMITH</i>	
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number <i>(219) 363-6768</i>
4. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address. <i>1028 S. 300 E.</i>	
5. City, State, ZIP Code <i>LAFORTE, IN 46350</i>	6. Party Affiliation (if applicable) <i>REPUBLICAN</i>

### CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nicknames.) <i>JOSEPH SMITH</i>	8. Party Affiliation or if Independent Candidate <i>REPUBLICAN</i>
9. Office Sought (include district number, if any. Not required for exploratory committees.) <i>COUNCIL AT LARGE</i>	10. County of Residence <i>LAFORTE</i>

### TYPE OF REPORT

### CONVENTION CANDIDATES ONLY

11. Check one: <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other <input type="checkbox"/> Final / Disbands Committee (Lines 13, 14, and 20 must be 0) <input type="checkbox"/> Outgoing Treasurer (within ten (10) days around Statement of Organization)	Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention
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12. Reporting Period (mm/dd/yyyy): From: <i>9/16/2020</i> Through: <i>12/31/2020</i>	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	<i>711.50</i>	
14. Cash on hand and investments January 1, current year.		

### CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (Use Schedule A.)		
15b. Unitemized		
15c. Add lines 15a and 15b in both columns.	<b>SUBTOTAL</b>	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	<b>TOTAL</b>	
	<i>711.50</i>	

### EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		
17b. Unitemized		
17c. Add lines 17a and 17b in both columns.	<b>SUBTOTAL</b>	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	<b>TOTAL</b>	
	<i>711.50</i>	<i>711.50</i>
19. Debts OWED BY the committee (Use Schedule D.)		
20. Debts OWED TO the committee (Use Schedule E.)		

### CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer <i>L. Evans</i>	Title <i>TREASURER</i>	Date (mm/dd/yyyy) <i>1-06-2021</i>
Signature of Candidate (if applicable) <i>Jim Smith</i>		Date (mm/dd/yyyy) <i>1-06-2021</i>

FOR OFFICE USE ONLY  
IN CLERKS OFFICE

MAR 26 2024

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purposes. (IC 3-9-4-6) 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 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

*L. Evans*  
CLERK OF LA PORTE CIRCUIT COURT

# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

**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

46-2449

TOTAL PAGES IN ENTIRE CFA-4 REPORT

## COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization)  Check if this is a new name.  
COMMITTEE TO ELECT JOE SMITH

2. Acronym or Abbreviated Name (if any)  
COMMITTEE TO ELECT JOE SMITH

3. Committee Telephone Number  
(219) 363-7078

4. Mailing Address (Address where all campaign finance correspondence is received.)  
1008 S. 300E.

5. City, State, ZIP Code  
LAFAYETTE, IN 46350

6. Party Affiliation (if applicable)  
REPUBLICAN

7. Full Name of Candidate (include any nicknames)  
JOSEPH SMITH

8. Party Affiliation or if Independent Candidate  
REPUBLICAN

9. Office Sought (include district number, if any. Not required for exploratory committee.)  
NOMINATE AT LARGE

10. County of Residence  
LAFAYETTE

## TYPE OF REPORT

11. Check one:  
 Final / Disbands Committee (lines 14, 15, and 20 must be 0.)  
 Outgoing Treasurer (fills in (18) days second Statement of Organization)  
 Pre-Primary  Pre-Election  Annual  Nomination  Other  
 Check one:  Pre-Convention  Post-Convention

12. Reporting Period (month/year):  
From: 11/01/2021 Through: 12/31/2021

13. Cash on hand and investments at the beginning of this reporting period.  
711.50

14. Cash on hand and investments January 1, current year.

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (Use Schedule A.)

15b. Unitemized

15c. Add lines 15a and 15b in both columns.

SUBTOTAL

TOTAL

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.)

17b. Unitemized

17c. Add lines 17a and 17b in both columns.

SUBTOTAL

TOTAL

18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)  
711.50

19. Debts OWED BY the committee (Use Schedule D.)

20. Debts OWED TO the committee (Use Schedule E.)

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer: [Signature]  
Signature of Candidate (if applicable): [Signature]

Date (month/year): 11/08/22

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-5-4-4) 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 3-5-4-16, IC 3-5-4-17, IC 3-5-4-18)

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MAR 26 2024  
Lafayette  
CLERK OF LA PORTE CIRCUIT COURT



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4806 (R15/5-19)

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

(CFA-4)  
Summary Sheet

FILE NUMBER  
**40-24-49**

TOTAL PAGES IN ENTIRE CFA-4 REPORT

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

### COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name. <b>COMMITTEE TO ELECT JOE SMITH</b>	
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number <b>(219) 363-6768</b>
4. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address. <b>1078 S. 300E.</b>	
5. City, State, ZIP Code <b>LAFAYETTE, IN 46350</b>	6. Party Affiliation (if applicable) <b>REPUBLICAN</b>

### CANDIDATE INFORMATION (For Candidates Committees Only)

7. Full Name of Candidate (include any nicknames) <b>JOSEPH SMITH</b>	8. Party Affiliation or if Independent Candidate <b>REPUBLICAN</b>
9. Office Sought (include district number, if any. Not required for exploratory committee.) <b>POWELL AT LARGE</b>	10. County of Residence <b>LAFAYETTE</b>

### TYPE OF REPORT

### CONVENTION CANDIDATES ONLY

11. Check one: <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other <input type="checkbox"/> Final / Disbands Committee (Lines 18, 19, and 20 need to be 0.) <input type="checkbox"/> Outgoing Treasurer (Within two (2) days amend Statement of Organization)	Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention
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12. Reporting Period (mm/dd/yy): From: <b>1/01/2022</b> Through: <b>12/31/2022</b>	COLUMN A This Period	COLUMN B Year to Date
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13. Cash on hand and investments at the beginning of this reporting period.	<b>711.50</b>	
14. Cash on hand and investments January 1, current year.		

### CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (Use Schedule A.)		
15b. Unitemized		
15c. Add lines 15a and 15b in both columns.	<b>SUBTOTAL</b>	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	<b>TOTAL</b>	

### EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (Use Schedule B.) (Public Question Use Schedule C.)		
17b. Unitemized <b>BANK SERVICE CHARGE</b>	<b>605.00</b>	
17c. Add lines 17a and 17b in both columns.	<b>SUBTOTAL</b>	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	<b>TOTAL</b>	<b>705.00</b>
19. Debts OWED BY the committee (Use Schedule D.)		
20. Debts OWED TO the committee (Use Schedule E.)		

### CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer <b>Thomas L. Jones</b>	Title <b>TREASURER</b>	Date (mm/dd/yy) <b>1/08/2023</b>
Signature of Candidate (if applicable) <b>Joe Smith</b>		Date (mm/dd/yy) <b>1/08/2023</b>

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)

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MAR 26 2024

CHECK OFF



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4008 (R15/5-18)

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

IS THIS AN AMENDMENT?  Yes  No

FILE NUMBER

46-24-49

TOTAL PAGES IN ENT RE CFA-4 REPORT

### COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name. <i>COMMITTEE TO ELECT JOE SMITH</i>	
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number <i>(219) 363-6768</i>
4. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address. <i>1098 S. 300 E.</i>	
5. City, State, ZIP Code <i>LAPORTE IN 46350</i>	6. Party Affiliation (if applicable) <i>REPUBLICAN</i>

### CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nicknames) <i>JOE SMITH</i>	8. Party Affiliation or If Independent Candidate <i>REPUBLICAN</i>
9. Office Sought (include district number, if any. Not required for exploratory committees.) <i>COUNCIL AT LARGE</i>	10. County of Residence <i>LAPORTE</i>

### TYPE OF REPORT

### CONVENTION CANDIDATES ONLY

11. Check one: <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other <input type="checkbox"/> Final / Disbands Committee (Lines 13, 14, and 20 must be "0") <input type="checkbox"/> Outgoing Treasurer (With in (10) days amend Statement of Organization)	Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention
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12. Reporting Period (mm/dd/yy): From: <i>1/10/2023</i> Through: <i>12/31/2023</i>	COLUMN A This Period	COLUMN B Year-to-Date
13. Cash on hand and investments at the beginning of this reporting period.	<i>705.00</i>	
14. Cash on hand and investments January 1, current year.		

### CONTRIBUTIONS AND RECEIPTS

<i>(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)</i>		
15a. Itemized (Use Schedule A.)		
15b. Unitemized	<i>1.00</i>	
15c. Add lines 15a and 15b in both columns. SUBTOTAL	<i>1.00</i>	
16. Add line 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL	<i>706.00</i>	

### EXPENDITURES

<i>(Note: These amounts include in-kind expenditures and loan repayments.)</i>		
17a. Itemized (Use Schedule B.) (Public Question: Use Schedule C.)		
17b. Unitemized <i>BANK SERVICE CHARGE</i>	<i>13.00</i>	
17c. Add lines 17a and 17b in both columns. SUBTOTAL	<i>13.00</i>	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) TOTAL	<i>693.00</i>	<i>693.00</i>
19. Debts OWED BY the committee (Use Schedule D.)		
20. Debts OWED TO the committee (Use Schedule E.)		

### CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer <i>Thomas J. Owen</i>	Title <i>TREASURER</i>	Date (mm/dd/yy) <i>1/10/2024</i>
Signature of Candidate (if applicable) <i>Joe Smith</i>		Date (mm/dd/yy) <i>1/10/2024</i>

**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)

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MAR 26 2024

*Thomas J. Owen*  
CLERK OF LA PORTE