

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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 N

(CFA-4) Summary Sheet

FILE NUMBER

4(0-24-54

TOTAL PAGES IN ENTIRE CFA-4 REPORT

| IS THIS AR AMENDMENT! L TES L NO | L | | |
|---|--|---|-------------------------------|
| COMMITTEE INFORMATION | | ··· | |
| 1. Full Name of Committee (as on Statement of Organization) Check if this is a new | name. | | |
| Mailaika Beeti | | | |
| 2. Acronym or Abbreviated Name (if any) | 3. Committee Telephone Number | | |
| | (90) | (907) 220 - 2424 | |
| 4. Mailing Address (Address where all campaign finance correspondence is received.) | Check if ti | his is a new address. | |
| 5. City, State, ZIP Code | 6. Party Affiliation (if applicable) | | |
| Kingsford Hots, IN 46846 | Democrat | | |
| CANDIDATE INFORMATION (For Candidate's C | Committe | ees Only) | |
| 7. Full Name of Candidate (Include any nickname.) | 8. Party Affiliation or If Independent Candidate | | |
| Mailailla Bealy | + | Democrat | |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.) | | 10. County of Residence | |
| Clerk Treasurer | j. • | | |
| TYPE OF REPORT | | | ON CANDIDATES ONLY |
| 11. Check one: | | Check one: | |
| Pre-Primary Pre-Election Annual Nomination Other | | Pre-Convention | |
| Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend Sta | atement of Or | ganization.) L Post-Co | nvention |
| 12. Reporting Period (mm/dd/yy): | | COLUMN A | COLUMN B |
| From: Through: | | This Period | Year to Date |
| 13. Cash on hand and investments at the beginning of this reporting period. | | 0 | |
| 14. Cash on hand and investments January 1, current year. | | | 0 |
| CONTRIBUTIONS AND RECEIPTS | | | |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) | | 0 . | 0 |
| 15a. Itemized (Use Schedule A.) 15b. Unitemized | | 0 | 0 |
| | TOTAL | D | 0 |
| | TOTAL | D | 0 |
| | | U | |
| EXPENDITURES | | | |
| (Note: These amounts include in-kind expenditures and loan repayments.) | | 0 | 0 |
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) | | <u> </u> | 0 |
| 17b. Unitemized | · · · · | <u> </u> | 0 |
| | STOTAL | D | |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) | TOTAL | 0 | D |
| 19. Debts OWED BY the committee (Use Schedule D.) | | 0 | |
| 20. Debts OWED TO the committee (Use Schedule E.) | | D | |
| CERTIFICATION | | | FOR OFFICE USE ONLY |
| I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS | TRUE, COF | RRECT AND COMPLETE. | TED |
| Signature of Treasurer Title | | Date (mm/dd/yy) | IN CLERKS OFFICE |
| : | | | IIN CLLING |
| | | Date (mm/dd/yy) | _ n a anan |
| MAR 28 | | | MAR 2 8 2024 |
| 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 | | | |
| I 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 a | as required by the Indiana [| . <u> </u> |
| files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accur Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-5) | ate report a | as required by the Indiana -9-4-17, IC 3-9-4-18) | LERK OF LA PORTE CIRCUIT COUR |