(CFA-1)

#### CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE State Form 4604 (R15 / 5-19)

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

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

OAKE       Heather       Lynn       Conditates Principal Committee         Mailing Address (number and street, city state, and ZIP code)       5. FAX (Optional)       6. E-mail Address (Optional)         3300       N · 50 E ·       .       .         . City       State       ZIP Code       8. County       9. Telephone (Day)       10. Telephone (Evening)         . Party Affiliation       IN       46350       La Port       (JIQ) 239-8055       .         1. Party Affiliation       IN       46350       La Port       (JIQ) 239-8055       .         Democratic       Libertarian       Republican       Other       County       10. Telephone (Evening)         Democratic       Libertarian       Republican       Other       County       12. Office Sought (Incluide district number, if any. Not required for an exploratory commutae.)         Section B.       COMMUTTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.       .         State       Deleck if this is a new name.       OAKe       Oake       Counci I         4.       Mailing Address (number and street. city, state, and ZIP code)       Check if this is a new address.       15. FAX (Optional)       16. E-mail Address (Optional)         3306       N. SO E.       IN       46350       La Portk       IIQ				<u></u>		FILE NUMBER
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Labort       Community       Federal       Credit       Union         6. Exploratory Committee (Gwe brief statement exploring purpose of an exploratory committee out/)       31. Statistics and Retimbursements (Will the committee pay the candidate a surgery or networksement for lost wages? If Yes, sitech a copy of the contract.)       Yes       No         ECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)         2. 1, as Chairperson of the foregoing Person Appointed Treasurer       Signature of the Committee Chairperson       Signature of the Committee Chairperson         2. 1, as Chairperson of the foregoing Person Appointed Treasurer       Signature of the Committee Chairperson       No         2. 1, as Chairperson of the foregoing Person as       Cobe+ Hensell       No       No         2. 1, as Chairperson of the foregoing Person as       Cobe+ Hensell       No       No         2. 1, as Chairperson of the Committee       Designate condidate as treasurer.       Check if this is a new inteasurer.       Signature of the Committee Chairperson         Malting Address (number and store, utry is a store at the store of the Committee Chairperson       Inteasurer of the Committee Chairperson       No         10795       E. Checokee       R.L.       Signature of the committee chairperson of a campaign finance committee (except as committee under IC 3-9-17).       Signature of Chairperson       Signature of Chairperson       Signature of Chairperson       Signature of Chairperson <t< td=""><td>29. Bank or Other Depositories (Li</td><td></td><td></td><td>denosite Lords, holds accounts</td><td></td><td>1) 224-8055</td></t<>	29. Bank or Other Depositories (Li			denosite Lords, holds accounts		1) 224-8055
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remoursement for lost wages? If Yes, attach a copy of the contract.)       Yes	30. Exploratory Committee (Give bri	of statement explaining purpose	of an exploratory committee profy.)	31. Salaries and Reimbursem	ents (Will the comm	ittee pay the candidate a salary or
2. 1, as Chairperson of the foregoing ormittee, appoint the foregoing Person Appointed Treasurer of the Committee Chairperson of the Committee.       Signature of the Committee Chairperson Accepting Appointed Treasurer.         Cobert       Cobert       Cobert       Cobert       Cobert       Northur Oake         3. Treasurer's Full Name       Designate candidate as treasurer.       Check if this is a new treasurer.       Northur Oake         4. Mailing Address (number and stoet, cir, state and ZiP code)       Check if this is a new address.       35. FAX (Optional)       36. E-mail Address (Optional)         10795       E. Cherookee       K.d.       K.d.       40. Telephone (Dey)       40. Telephone (Evening)         Value       IN       Yub S 74       Stark Ke       ST4, 586-3740       574, 586-3740         EECTION D.       ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)       1. I give notice that I accept the duties and responsibilities of Treasurer of this Signature of Person Accepting Appointment ommittee.       FIL I E D         istamined this statement. To the best of our knowledge and belief it is true, correct and complete.       FIL I E D       IN         2. Typed or Printed Name of Chairperson       Signature of Chairperson       Signature of Chairperson       Date (mmiddyy)       FIL I E D         3. Treasurer of this statement. To the best of our knowledge and belief it is true, correct and complete.       Date (mmiddyy)       FIL I E D       IN<				relmbursement for lost wages?	lf Yes, atlach a cop	y of the contract.) Thes XNo
ormmittee.       appoint the following person as       Lobert Honsell       Natthe Oake         is reasurer of the committee.       Designate candidate as treasurer.       Check if this is a new treasurer.       Natthe Oake         is Treasurer's Full Name       Designate candidate as treasurer.       Check if this is a new treasurer.       Natthe Oake         is Treasurer's Full Name       Designate candidate as treasurer.       Check if this is a new treasurer.       It has a new treasurer.         is Treasurer's Full Name       Designate candidate as treasurer.       Designate candidate as treasurer.       It has a new treasurer.         is The provide the durbes of the durbes and responsibilities of Treasurer of this [Signature of Person Accepting Appointment ommittee. I am not the chairperson of a campaign finance committee (except as the and the durbes and responsibilities of Treasurer of this [Signature of Person Accepting Appointment Committee under IC 3-9-1-7).         ECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)       It is the candidate committee under IC 3-9-1-7).         I give notice that I accept the durbes and responsibilities of Treasurer of this [Signature of Person Accepting Appointment Committee under IC 3-9-1-7).       FOR OFFICE USE ONLY         For OFFICE USE ONLY       For OFFICE USE ONLY       FOR OFFICE USE ONLY         I give notice that I accept the durbes and the durb appointed Chairperson of the Committee and that we have attement. To the best of our knowledge and belief it is true, correct and complete.       FOR OFFICE USE ONLY     <	SECTION C. APPOINT	MENT OF TREAS	URER (IC 3-9-1-14)			
reasurer of the Committee.       Notice of the Committee.         3. Trassurer's Full Name       Designate candidate as treasurer.       Q Check if this is a new treasurer.       Notettue Ua (A)         4. Mailing address (number and streat. vir, state and ZP code)       Check if this is a new address.       35. FAX (Optional)       36. E-mail Address (Optional)         10795       E. Checo Kee       K.d.       State       ZIP code       38. County       39. Telephone (Day)         40. Telephone       IN       44574       Star Ke       S74, S86-3740       (S74) S8(e - 3740         ECTION D.       ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)       1.1       give notice that I accept the duties and responsibilities of Treasurer of this Signature of Person Accepting Appointment ommittee. I am not the chairperson of a campaign finance committee (except as emitted for a candidate under IC 3-9-1-7).       FOR OFFICE USE ONLY         ECTION E.       CERTIFICATION OF STATEMENT       FOR OFFICE USE ONLY       FOR OFFICE USE ONLY         Ve certify as the candidate and the duly appointed Chairperson       Date (mmidd/y)       Date (mmidd/y)         3. Typed or Printed Name of Candidate       Signature of Candidate       Date (mmidd/y)       FEB 1 6 2024         Harther       Oa/ke       Date (mmidd/y)       Address (UI 2-4-17, and C 2-9-4-18).       Address for the chairperson commits a Level 0 felory (IC 3-14-1-13). A person who fails to lif					re of the Committe	e Chairperson
3. Treasurer's Full Name       Designate candidate as treasurer.       Check if this is a new treasurer.         Robert       G len       Hensell         4. Mailing Address (number and stront, state and ZIP code)       Check if this is a new address.       35. FAX (Optional)       36. E-mail Address (Optional)         10795       E , Cherokee       Rd.		wing person as	obert Hense	11 160	atter O	ake
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4. Mailing Address (number and street, cirr, state and 21P code)       Check if this is a new address.       35. FAX (Optional)       36. E-mail Address (Optional)         10795       E. Cherokee       Kd.       39. Telephone (Day)       40. Telephone (Evening)         Walkerton       IN       44574       Stark (ST4)       S56-3740       (574)       S546-3740         ECTION D.       Acceptance of Appointment (IC 3-9-1-7).       Signature of Person Accepting Appointment of a campaign finance committee (except as emitted for a candidate committee under IC 3-9-1-7).       FOR OFFICE USE ONLY         ECTION E.       CERTIFICATION OF STATEMENT       FOR OFFICE USE ONLY         Image: State and the duily appointed Chairperson of the committee and that we have amined this statement. To the best of our knowledge and belief it is true, correct and complete.       FOR OFFICE USE ONLY         Image: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A curve Charles on who fails to file a complete or curve a required by the Indiana Campaign finance Law commuts a Class B misdemeanor (IC 3-14-1-14), and may bo curve curve and state of Calculate treport as required by the Indiana Campaign Finance Law commuts a Class B misdemeanor (IC 3-14-1-14), and may bo curve curve to a start of Class I-160. Section Court	Robert G	len Hense	11			
X. City       State       ZIP Code       38. County       39. Telephone (Day)       40. Telephone (Evening)         Walkerton       IN       46574       StarKe       ST4, 586-3740       ST4, 586-3740       ST4, 586-3740         ECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)       1. I give notice that I accept the duties and responsibilities of Treasurer of this       Signature of Person Accepting Appointment         ommittee.       I am not the chairperson of a campaign finance committee (except as ermitted for a candidate committee under IC 3-9-1-7).       FOR OFFICE USE ONLY         Section E. CERTIFICATION OF STATEMENT       FOR OFFICE USE ONLY         Ve certify as the candidate and the duly appointed Chairperson of the Committee and that we have trained this statement. To the best of our knowledge and belief it is true, correct and complete.       FOR OFFICE USE ONLY         2. Typed or Printed Name of Chairperson       Signature of Chairperson       Date (mmiddlyy)       Mather         3. Typed or Printed Name of Candidate       Signature of Candidate       Date (mmiddlyy)       FEB 1 6 2024         4. Heather       Oake       Oal 15 24       Autom Cake       Autom Cake         4. Heather       Oake       Oal 15 24       Autom Cake       Autom Cake         4. Heather       Oake       Oal 15 24       Autom Cake       Autom Cake         4. Staou Cay 447, and Cay 447, and Cay 447, and	34. Malling Address (number and stree	t. city, state and ZIP code)	Check if this is a new addre	ss. 35. FAX (Optional)	36. E-mail Addr	ess (Optional)
Walkston       IN       46574       Starke       ST4, 586-3740       ST4, 586-3740         ECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)       Signature of Person Accepting Appointment         1. I give notice that I accept the duties and responsibilities of Treasurer of this       Signature of Person Accepting Appointment         ommittee. I am not the chairperson of a campaign finance committee (except as ermitted for a candidate committee under IC 3-9-1-7).       State Ample       FOR OFFICE USE ONLY         ECTION E. CERTIFICATION OF STATEMENT       FOR OFFICE USE ONLY       FOR OFFICE USE ONLY         Ve certify as the candidate and the duly appointed Chairperson of the Committee and that we have xamined this statement. To the best of our knowledge and belief it is true, correct and complete.       Signature of Chairperson       Signature of Chairperson         Acther       Oale       02/15/24       In CLERKS OFFICE         Yeed or Printed Name of Candidate       Signature of Candidate       Signature of Candidate       Date (mm/dd/yr)         Heather       Oake       02/15/24       FEB 16 2024         Varning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A geneson who fails to file a complete or counted by the Indiana Campaign Finance Law commuts a Class B misdelineanor (IC 3-9-1-10). A class B complete or counted by the Indiana Campaign Finance Law commuts a Class B misdelineanor (IC 3-9-1-10). A class B complete or class B misdelineanor (IC 3-9-1-10). A class B complete or c						
Section D.       Acceptance of Appointment (IC 3-9-1-15)         1. I give notice that I accept the duties and responsibilities of Treasurer of this ommittee. I am not the chairperson of a campaign finance committee (except as emitted for a candidate committee under IC 3-9-1-7).       Signature of Person Accepting Appointment         Vector R.       CERTIFICATION OF STATEMENT       FOR OFFICE USE ONLY         Vector Statement. To the best of our knowledge and belief it is true, correct and complete.       FOR OFFICE USE ONLY         2. Typed or Printed Name of Chairperson       Signature of Chairperson       Date (mmiddlyy)         Mather       Oake       Oaks       FEB 1 6 2024         3. Typed or Printed Name of Candidate       Signature of Candidate       Datture of Candidate       Datture of Candidate         Warning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A person who fails to file a complete or courring a required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be clear to courre to courre to courre to courre to courre to a class B misdemeanor (IC 3-14-1-14), and may be clear to courre to courre to courre to courre to a class B misdemeanor (IC 3-14-1-14), and may be clear to courre to a class B misdemeanor (IC 3-14-1-14), and may be clear to courre to coure to coure to courre to courre to coure to courre to c						
1. I give notice that I accept the duties and responsibilities of Treasurer of this Signature of Person Accepting Appointment ommittee. I am not the chairperson of a campaign finance committee (except as armined for a candidate committee under IC 3-9-1-7).       Signature of Person Accepting Appointment for a candidate committee under IC 3-9-1-7).         SECTION E. CERTIFICATION OF STATEMENT       FOR OFFICE USE ONLY         We certify as the candidate and the duly appointed Chairperson of the Committee and that we have xamined this statement. To the best of our knowledge and belief it is true, correct and complete.       FOR OFFICE USE ONLY         2. Typed or Printed Name of Chairperson       Signature of Chairperson       Date (mm/dd/yy)         Heather       Oake       Signature of Candidate       Date (mm/dd/yy)         3. Typed or Printed Name of Candidate       Signature of Candidate       Date (mm/dd/yy)       FEB 1 6 2024         Warning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A commits a Level 6 D felony (IC 3-14-1-13). A person who fails to file a complete of curve a required by the Indiana Campaign Finance Law commits a Class B misdelineanor (IC 3-14-1-14), and may be define to fold a Porte Circuit Court	-			2 (574) 586-3	140 51	4 586-3740
ommittee. I am not the chairperson of a campaign finance committee (except as ermitted for a candidate committee under IC 3-9-1-7).       Image: Committee under IC 3-9-1-7).         ECTION E. CERTIFICATION OF STATEMENT       FOR OFFICE USE ONLY         Ve certify as the candidate and the duly appointed Chairperson of the Committee and that we have xamined this statement. To the best of our knowledge and belief it is true, correct and complete.       FI I E D         2. Typed or Printed Name of Chairperson       Signature of Chairperson       Date (mm/dd/yy)         4. A A Mer       Oake       Date (mm/dd/yy)         3. Typed or Printed Name of Candidate       Signature of Candidate       Date (mm/dd/yy)         Warning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A reson who knowingly files a tradudient report commits a Level 6 D felony (IC 3-14-1-13). A person who fails to file a complete or curvate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be CIERK OF IA PORTE CIRCUIT COURT	SECTION D. ACCEPTA	NCE OF APPOIN	TMENT (IC 3-9-1-15			
ermitted for a candidate committee under IC 3-9-1-7). ECTION E. CERTIFICATION OF STATEMENT We certify as the candidate and the duly appointed Chairperson of the Committee and that we have xamined this statement. To the best of our knowledge and belief it is true, correct and complete. 2. Typed or Printed Name of Chairperson Heather Oake 3. Typed or Printed Name of Candidate Hather Oake Varning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A reson who knowingly files a tradudulent report commits a Level 6 D felony (IC 3-14-1-13). A person who fails to file a complete or courate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be CIERK OF IA PORTE CIRCUIT COURT	Gommittee. I am not the ch	airperson of a camp	sponsibilities of Treas	lexcept as	8 21	
We certify as the candidate and the duly appointed Chairperson of the Committee and that we have xamined this statement. To the best of our knowledge and belief it is true, correct and complete.       Image: Correct and complete.         2. Typed or Printed Name of Chairperson       Signature of Chairperson       Date (mm/dd/yy)         Heather       Oake       Oake       Oake         3. Typed or Printed Name of Candidate       Signature of Candidate       Date (mm/dd/yy)         Warning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A erson who knowingly files a fraudulent report commits a Level 6 D felony (IC 3-14-1-13). A person who fails to file a complete or course report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be CIERK OF IA PORTE CIRCUIT COURT	permitted for a candidate com	mittee under IC 3-9-1-	7).	Call	an Jank	il (
xamined this statement. To the best of our knowledge and belief it is true, correct and complete.         2. Typed or Printed Name of Chairperson       Signature of Chairperson       Date (mm/dd/yy)         Heather       Oake       Date (mm/dd/yy)         3. Typed or Printed Name of Candidate       Signature of Candidate       Date (mm/dd/yy)         Heather       Oake       Date (mm/dd/yy)       Date (mm/dd/yy)         3. Typed or Printed Name of Candidate       Signature of Candidate       Date (mm/dd/yy)         Heather       Oake       Dattur       Oake         Varning:       State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A reson who knowingly files a fraudulent report commits a Level 6 D felony (IC 3-14-1-13). A porson who fails to file a complete or curve report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be CIERK OF IA PORTE CIRCUIT COURT						
2. Typed or Printed Name of Chairperson Heather Oake 3. Typed or Printed Name of Candidate Heather Oake Varning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A reson who knowingly files a traudulent report commits a Level 6 D felony (IC 3-14-1-13). A person who fails to file a complete or courate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be Clerk OF IA PORTE CIRCUIT COURT					e have	· ··· ··· ·· ·
3. Typed or Printed Name of Candidate       Signature of Candidate       Date (mm/dd/yy)         Hather       OaKe       Neattur       OaKe       O2/15/24         Varning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A erson who knowingly files a traudulent report commits a Level 6 D felony (IC 3-14-1-13). A person who fails to file a complete or course report as required by the Indiana Campaign Finance Law commits a Class B misdeineanor (IC 3-14-1-14), and may be CERK OF LA PORTE CIRCUIT COURT					5y)	IN CLERKS OFFICE
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Heather Oake Noatten Oake O2/5/24 Varning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A reson who knowingly files a tradulent report commits a Level 6 D felony (IC 3-14-1-13). A porson who fails to file a complete or curve report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be CERK OF LA PORTE CIRCUIT COURT	* * * **	Candidate Sign	iture of Candidate	Date (mm/dd		
Varning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A erson who knowingly files a fraudulent report commits a Level 6 D felony (IC 3-14-1-13). A porson who fails to file a complete or course report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be clerk OF IA PORTE CRCUIT COURT in the civit penalties (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18).			II 6 V			
erson who knowingly files a fraudulent report commits a Level 6 D felony (IC 3-14-1-13). A person who fails to file a complete of ccurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be other to civil penalties (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18).						
ccurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be CIERK OF LA PORTE CIRCUIT COURT Library be to civil penalties (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18).	nerson who knowlooly files a fraudu	lent renort commits a Lev	el 6 D felony (IC 3-14-1-13).	A person who fails to file a col	mplete on	Lason Otions
Lo: 31 C no	accurate report as required by the	Indiana Campaign Financ	a Law commits a Class B m	isdemeanor (IC 3-14-1-14), and	i may bd CE	RK OF LA PORTE CIRCUIT COURT
	subject to give penalties (nc 3-9-4-16	. 10 0-9"4" (1) and 10 0"9"4	15/21		1	izlam.

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE	(CFA-4)
State Form 4606 (R17 / 8-23) Indiana Election Division (IC 3-9-5-14)	Summary Sheet
	FILE NUMBER
<b>INSTRUCTIONS:</b> Please type or print legibly <b>IN BLACK INK</b> all information on this form. For assistance in completing this form, see instructions on the reverse side.	410 - 24 - 23
IS THIS AN AMENDARENTA	TOTAL PAGES IN ENTIRE CFA-4 REPORT
IS THIS AN AMENDMENT? Yes X No	3
COMMITTEE INFORMATIO	N
1. Full Name of Committee (as on Statement of Organization) Check if this is a n OQKP, $fDC$ (OULOC)	
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number
A Mailing Address (Add	(219) 229 - 8055
4. Mailing Address (Address where all campaign finance correspondence is received.)       []         3300       N : 55 E :         5. City, State, ZIP Code       []	Check if this is a new address.
Laporte, IN 46350	6. Party Affiliation (if applicable)
CANDIDATE INFORMATION (For Candidate's	s Committees Only)
Leather Lynn Oake.	8. Party Affiliation or If Independent Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	Republican 10 County of Residence
and the country council at large	La Porte,
11. Check one:	CONVENTION CANDIDATES ONLY
Pre-Primary Pre-Election Annual Nomination Other	Check one:
Final / Disbands Committee (Lines 18 19, and 20 must be "0".) Outgoing Treasurer (Within Ian (10) days amend S	Pre-Convention
12. Reporting Period (mm/dd/yy):	Statement of Organization.)
From: 01/01/24 Through: 04/12/24	COLUMN A COLUMN B
13. Cash on hand and investments at the beginning of this reporting partial	This Period Year to Date
	\$23.73
CONTRIBUTIONS AND DESCRIPTIONS	\$23.73
(Note: those amounts include In-kind contributions and loans, as well as cash contributions.) 15a, Itemized (Use Schedule A.)	
15b. Unitemized	#23.73 #22.73
15c. Add lines 15a and 15b in both columns.	# 23.73 # 23.73
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	STOTAL \$23.73 \$ 23.73
EXPENDITURES	TOTAL #23.73 23.73
(Note, These amounts include in-kind expenditures and loan repayments.)	
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	
7b. Unitemized	123.73 123.73
7c. Add lines 17a and 17b in both columns,	
8. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)     9. Debts OWED BY the	STOTAL #23-73 123-73
9. Debts OWED BY the committee (Use Schedule D.)	TOTAL
0. Debis OWED TO the committee (Use Schedule E.)	0
	0
CERTIFY THAT I HAVE EXAMINED THIS STATEMENT TO THE OFFICIATION	
CERTIFICATION CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TO ignature of Treasurer Title	RUE, CORRECT AND COMPLETE.
- Product Fealer	Date (mm/dd/yy)
i pippingana) - 1	03/27/24
ARNING: Any information contained in this provide	Date (min/dd/yy) O3/27/24
ARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. ( is a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate impaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9	(IC 3-9-4-5) A person who knowibaly
impaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-13) A person who fails to file a complete or accurate Impaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties, (IC 3-9-4	e report as required by the Indiana 4-16. IC 3-9-4-17. IC 3-9-4-18)
	CLERK OF LA PORTE CIRCUIT COURT

**\***1 \$

### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

	FIL	E NUMBE	R	
Page_	2	of	3	

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	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
Heather Uak	Direct	122 -22	4	02/27/24
"Heather Oake 3306 N. 50 E. La Porte, IN 46350	In-Kind (describe)	\$23.73	23.73	02/27/24 Heather Oake
LaPorte, IN 46350	DUSINESS CARS	*		
- /	Interest Loan			
. + 0	Miscellaneous (specify)			
Contributor's Occupation (if required)NA				
κ.	Contributions:			
	In-Kind (describe)			
	Other Receipts			
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
3.	Contributions:			
	Direct			
	In-Kind (describe)			1
	Other Receipts:			
	Interest Loan		4	
Contributor's Occupation (if required)	Miscellaneous (specify)			
4	Contributions			
	Direct			
	In-Kind (describe)			
	Other Duranization			
	Other Roceipts:			
	Miscellaneous (spocify)			
Contributor's Occupation (# required)	-			
	Contributions:			
1	Direct			
	Other Receipts:	2 Martin - 1990		
	Interest Loan  Miscellaneous (specify)			
Contributor's Occupation (if required)	macenaneous (specity)			
TOTAL OF ALL PAGES OF SCHEDULE A C	NTHELAST DACE ONLY	\$ 23.73		
(Enter total on ITEM 1	5a of the Summary Sheet.)	\$ 23.73		



#### 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 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, tabor 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.

# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

	FILE	NUMB	ER	
Page_	3	of	3	

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 Hather Oake 3306 N. 50 E. La Port, IN 46350	NA LaPorte County Council at Large	Direct In-Kind Payment of Debt Returned Contribution Other Purpose	\$23.73	\$23.73	02/07/24
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purposo:			
Code		Direct In-Kind Payment of Debi Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Cade		D-rect In-Kind Payment of Debt Raturned 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:			
TOTAL OF ALL PA	SUBTOTAL THIS PAG		\$ 23.73	1969 - La	
	(Enter total on ITEM 17a of th	e Summary Sheet.)	\$23.73		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4506 (R1575-19) Indiana Election Division (IC 3-9-5-14)	(CFA Summar FileNU	y 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.	410-24-	23 TIRE CFA-4 REPORT
IS THIS AN AMENDMENT? Yes No	3	
COMMITTEE INFORMATION		
1. Full Name of Committee (as on Statement of Organization)	<u>An an an</u>	
2. Acronym or Abbreviated Name (if any) 3. Co	mmittee Telephone Number	
	19)229-81	055
3306 N. SO E.	this is a new address.	
	rty Affiliation (if applicable)	
CANDIDATE INFORMATION (For Candidate's Commin	Republican	
	rty Affiliation or If Independe	ent Candidate
Heather Linn Oake	Republicar	
9. Office Sought (Include district number, if any. Not required for exploratory committee.) 10. C	ounty of Residence	and a second
Laporte lounty Council at Large	LaPorte	
TYPE OF REPORT		ON CANDIDATES ONLY
11 Check one: Pre-Primary Pre-Election Annual Nomination Other	Check ane:	
Final / Disbands Committee (i ines 18, 19, and 20 must be '0'.) Outgoing Treasurer (Within ten (10) days amend Statement of C		
12. Reporting Period (num/dd/yy):		
From: 01/01/24 Through: 04/19/24	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	123.73	
14. Cash on hand and investments January 1. current year.		\$23.73
CONTRIBUTIONS AND RECEIPTS		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		10 2 20
15a. Itemized (Use Schedule A.)	\$23.73	\$23.73
15b, Unitemized 15c, Add lines 15e and 15b in both columns. SUBTOTAL	402 72	#23.73
	4 +2 * 13	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL EXPENDITURES	\$ 23,73	⊈ 23.73
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	123.73	\$23.73
17b. Unitemized	6	~ ~ ~
17c. Add lines 17a and 17b in both columns. SUBTOTAL	\$23.73	\$23.73
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) TOTAL	procession for the second s	
19. Debts OWED BY the committee (Use Schedule D.)	$\rightarrow$	
20. Debts OWED TO the committee (Use Schedule F.)	8	
	i	
CERTIFICATION		T L ENLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE. CC Signature of Treasurer Title	Date (mm/dd/yy)	IN CLERKS OFFICE
Potul treasurer	04/17/24	
Signature of Candidate (if applicable)	Date (mm/du/yy) 04/17/24	APR 1 7 2024

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	WARNING: Any information contained in this report may not be copied for sale or used for any commercial purposo. (IC 3-9-4-5)	A per	ion who	knowinaly
and the second s	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			
	Campeign Finance Law commits a Class B misdemeanor. (IC 3-14-1-14) and may be subject to civil penaltics. (IC 3-9-4-16. IC 3-9-	4.17.	IC 3-9-4-	18)

## REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

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

	FILE NUMBER
s	
r	
	Page 2 of 3

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 catendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as foan propeeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor's within a catendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at loast \$1,000 in contributions during the catendar year. Otherwise, this is optional.

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
Heather Oalle 3306 N. SOE. LaPorte, IN 46350	Contributions: Direct Direct Dising (describe) Dusing Scards Other Receipts: Interest Loan Miscellaneous (specify)			02/27/24 1+cather Oak
Contributor's Occupation (if required) NA		ang and scenese and a scenese desire of the self-11.1 (\$1.2 ) (\$1.2 )		
2.	Conributions. Direct In-Kind (delectibit) Other Receipts. therest Loan Miscellaneous (specify)			
Contributor's Occupation (# required)	Contributions			
3.	Other Receipts: Other Receipts: Interest [] Loan Misuelleneous /specify)			
Contributor's Occupation (if required)				
4.	Contributions: Direct In-Kind (describe) Cither Receipts: Interest Loan Miscellarioous (specify)	FILE	L E D IKS OFFICE	
Contributor's Occupation (@ require.t) 5.	Contributions:	I IN CE		
- · ·	Direct In-Kind ( <i>dosenbe</i> ) Other Receipts: Interest Loen Miccellaneous (specily)		172024 Harow Estworks	OURI
Contributor's Occupation (# required)	THIS PAGE OF SCHEDULE A	\$ 23.73		
TOTAL OF ALL PAGES OF SCHEDULE		· · · · · · · · · · · · · · · · · · ·		



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## **REPORT OF RECEIPTS AND EXPENDITURES** OF A POLITICAL COMMITTEE

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 schedulo.

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

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

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 (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
code A Heather Oake 3306 N. SO E. LaPorte, IN 46350		Drest In-Kind		\$ 23.73	
Code		Direct In-Kind Payment of Debt Returned Contribution Other Perpose;			·
Code		Direct In-Rod Payment of Debt Returaced Contribution Other Purpose.			
Code		Direct IsKind Payment of Dobt Returned Contribution Other Purpose			
Code		Direct In-Kind Fayment of Dabt Returned Coelectation Dener Purpose:			
Code		Direct In-Kind     Payment of Debt     Returned Centribution     Other     Purpose:	APR	5 OFFICE 7 2024	
Code		Direct In-Kind     Payment of Deixt     Returned Contribution     Other     Purpose:	L.L.L. CIERKOFI	NOUL ODWINS A PORTE CIRCUIT C	
	SUBTOTAL THIS PA	GE OF SCHEDULE B	\$ 23.73		• •
TOTAL OF ALL P	AGES OF SCHEDULE B ON TH	IE LAST PAGE ONLY the Summary Sheet.)	\$ 23.73		