

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

(CFA-1)

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

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

									FILE NUMBER
1. IS THIS AN AMENDMENT?	Yes	。 ☐ No If Yes,	pleas	e enter	the file n	umbe	er in this bo	x. →	410-24-24
SECTION A. CANDIDATE I	NFO	RMATION: <i>Fill</i>	in all	applic	able box	es as	s fully and	accura	ately as possible.
2. Last Name	Fit	rst Name		Middle N	ame		Nickname		3. Type of Committee (Check one)
Kirkham	_ [<	iharon		Ka	. J				Candidate's Principal Committee
4. Mailing Address (number and street, city, st.	ate and 2	(IP code)		()(7 14 FAY (03)			T	Exploratory Committee
DA BASE 1977	aię, anu 2)	ur codej			5. FAX (Opi	tional)			Address (Optional)
7. City 1000 1023					()			du51	41530@comcast.ne
ا ن ک نیا	State IN	ZIP Code	8. Cou		,	1	ephone (Day)	A	10. Telephone (Evening)
LaPorte	IIN	46352	L La		rte	11.	9363-		\
11. Party Affiliation	_			12. 0	Office Sough	t (Inclu	de district numl	er, if any.	Not required for an exploratory committee.)
☐ Democratic ☐ Libertarian ☐ Republi				_					
SECTION B. COMMITTEE I 13. Full Name of Committee (Do not abbri	NFO	RMATION: Fill	in all	applic	able box	es as	s fully and	accura	itely as possible.
		_ ^		me.					-
Sharon Kirkham		r Recoi	nale	21					
14. Mailing Address (number and street, city, s	tate, and	ZIP code)	f this is a	new add	ress. 15, FA	X (Opti	onal)	16. E-ma	il Address (Optional)
P.O. BOX 1823					Ι,)		1	
17. City	State	ZIP Code	18. Co	unty		19. Te	lephone	·	20. Committee Organization Date
La. Porte	IN	46352	110	Por	to	219	2363-	0462	(mm/dd/yy) 2-21-24
21. Chairperson's Full Name Design	nate Ca	ndidate as Chairperso	1	Check if i	this is a new o	V	,	• •	TO ALL MI
Shoon Kay Kin	UK	204				on an po			
22. Mailing Address (number and street, city, si	teto and	7/P code) Chack if	this is s	now add	ress. 23. FA	V 10-4		1-1-	
DO Bay 1913	iato, anu .	ZIF CODE) Crieck	uns is a	new addi	ess. 23. FA	x (Opti	onai)	24. E-ma	il Address (Optional)
15.01. DOX 1823	I				()		<u> </u>	
25. City S	State	ZIP Code	26. Co	unty	,	27. Tel	ephone (Day)		28. Telephone (Evening)
NO PORTE	ZN	4435B	La	Por	7e	219	<i>1 363</i> .	0462	A()
29. Bank or Other Depositories (List all ba	anks or e	other depositories in w	hich the	committe	e deposits fui	nds, hol	ds accounts, re	nts safety	deposit boxes or maintains funds.)
Tech Credit W		ON LIAK	BAL	P					
30. Exploratory Committee (Give brief statem			tory comm	ittee only.)	31. Salarie	s and F	Reimbursemer	ts (Will the	committee pay the candidate a salary or
					reimbursen	nent for	lost wages? If	Yes, attach	a copy of the contract.) 🔲 Yes 🥻 No
SECTION C. APPOINTMEN	T OF	TREASURER (IC 3_0	1-14	.1				
32. I, as Chairperson of the	forea	oing Person Appoir	ited Tre	asurer			Signature	of the Cou	mmittee Chairperson
committee, appoint the following	perso	n as Cl	~ 1	2.	12 1	ı f	00	0. 4.0 00.	12 V2 10 P
Treasurer of the Committee.		<u> </u>	<u> </u>	Vay	MICK	na	m Sh	aron	K. Forkan
33. Treasurer's Full Name Designate	e candid	ate as treasurer.	Check	if this is a	new treasure	er.	•		
- NUron Kay Kir	Kh	am							
34. Mailing Address (number and street, city, str	ate, and Z	(IP code) 🔲 Check if	this is a	new addr	ess. 35. FA	X (Optio	onal)	36. E-mai	Address (Optional)
P.O. Box 1823					()			
	tate		38. Cou			39. Tel	ephone (Day)	1	40. Telephone (Evening)
haPorte I	\mathcal{N}	46352	Lia	LPor	+0	210	9363	13462	
SECTION D. ACCEPTANCE							000	0100	Λ()
41. I give notice that I accept the	dutie	s and responsible	lities (of Treas	urer of th	is Sic	mature of Pa	reon Acc	conting Appointment
Committee. I am not the chairper	son o	f a campaign fina	nce co	ommitte	e (except a	as Oig	00		
permitted for a candidate committee	under	· IC 3-9-1-7).					maro.	a Tr.	Trakum
SECTION E. CERTIFICATIO									FOR OFFICE USE ONLY
We certify as the candidate and	the du	ily appointed Cha	irpers	on of the	ne Commit	ttee a	nd that we	have	FILED
examined this statement. To the bes 42. Typed or Printed Name of Chairp	t of ou				correct and				IN CLERKS OFFICE
	erson	Signature of C	nairpe	rson / (ノ ノ	0 0		Date (mm/dd/yy)		
Sharon Kay Kirkham	!	Sharox	_ 77	· 75	unka	m	9 2/21/	24	
43. Typed or Printed Name of Candid		Signature of C	andida	ite			Date (mm/dd/yy)	- 	FEB 2 1 2024
Sharon Kay Kirkha		30	42	ر را	. 10		المامه	المام	1 1 2 2 3 2024
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Warning: State law requires that any chain person who knowingly files a fraudulent rep	nge in t	nis information be replaints a Level 6 D felo-	orted wi	thin ten -14-1-121	(10) days of	the cha	ange (IC 3-9-1-	امدامدا	Lleane Stevers
accurate report as required by the indiana	Campa	ion Finance Law com	mits a C	-,—,-,-,≀3). Xass Bm	isdemeanor	no raiis (IC 3-1	4-1-14), and m	nay be	CLERK OF LA PORTE CIRCUIT COURT
subject to civil penalties (IC 3-9-4-16, IC 3-9-	4-17, ar	nd IC 3-9-4-18).					-9, -11-11	7 5-	



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) 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 X No

(CFA-4) Summary Sheet

FILE NUMBER
40-24-24
TOTAL PAGES IN ENTIRE CFA-4 REPORT

1. Full Name of Committee (as on Statement of Organization)	COMMITTEE INFORMATION						
Sharon Kirkham for Recorder 2. Addrown or Abbreviated Name (If any) 4. Idealing Address where all campaign finance correspondence is received.) Check if this is a new address.	1. Full Name of Committee (as on Statement of Organization) Check if this is a new	name.					
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4. Mailing Address (Address where all campaign finance correspondence is received.) Check it this is a new address. Ch. B. St. Party Affiliation (if applicable) Republican Reputly Affiliation (if applicable) Republican Republican Reputly Republican Reputly Republican Reputly Republican Reputly Pre-Blection Annual Monimation Other Reporting Pre-Report Annual Monimation other Reporting Pre-Report Annual Monimation of Pre-Report Reporting Pre-Report Reporting Monimation Other Reporting Pre-Report Annual Monimation of Pre-Report Reporting Pre-Reporting Monimation Other Reputly Annual Monimation of Pre-Report Annual Monimation of Pre-Reporting Pre-Reporting Monimation Other Reputly Annual Monimation Other Reputly Annual Monimation of Pre-Reporting Other Reputly Annual Monimation of Pre-Reporting Monimation Other Reputly Annual Monimation Other Reputly Annual Monimation of Pre-Reputly Annual Monimation Other Reputly Annual Monimation Reputly Annual Monimation Reputly Annual Monimation Reputly Annual Monimation Reputly		1 .					
F. City, State, ZIP Code La Porte IN CANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full Name of Candidate (include any nickname.) Sharon Kay Kirkham 8. Party Affiliation or II Independent Candidate Sharon Kay Kirkham 9. Office Sought (include district number, if agy. Not required for exploratory committee) La Porte County Reconded 10. County of Residence La Porte Type Office Committee (include in Annual Nomination Other Type Officer 11. Check one: Pre-Primary Pre-Election Annual Nomination Other The Primary Pre-Election Annual Nomination Other Pre-Primary Pre-Election (inm/dd/yr): Through: OH / 12 / 24 Through: OH / 13 / 24 This Period 14. Cash on hand and investments at the beginning of this reporting period. 15. Add lines 15a and 15c in Column A and lines 14 and 15c in Column B. EXPENDITURES (Note: These amounts include in-kind expenditures and loans, as well as cash contributions) 15a. Itemized (Use Schedule A) 17b. Unitemized 17c. Add lines 15a 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 19. Debts OWED BY the committee (Use Schedule E.) CERTIFICATION CERTIFICATION Title Scan on hand and investments at close of this reporting period (Subtrect 17c from 16 in both columns.) Total Promised (Use Schedule B) (Public Question: use Schedule E.) CERTIFICATION 10 Debts OWED TO the committee (Use Schedule E.) CERTIFICATION 10 Debts OWED TO the committee (Use Schedule E.) CERTIFICATION 10 Debts OWED TO the committee (Use Schedule E.) All All All All All All All All All Al	, , , , , , , , , , , , , , , , , , , ,	(219) 363					
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Compaign 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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