

## 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? Tyes No

(CFA-4) Summary Sheet

FILE NUMBER

410 - 24 - 58

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION	COMMITTEE INFORMATION			
1. Eall Name of Committee (as on Statement of Organization) Check if this is a new r	name.			
2. Acronym or Abbreviated Name (if any)	3. Committee T	elephone Number		
<i>\'\'\'\'</i>	( )			
4. Malling Address (Address where all campaign finance correspondence is received.)	Check if this is a n	ew address.		
5. City, State, ZIP Code BU CH IN 46360	6. Party Affiliati	on (if applicable)		
CANDIDATE INFORMATION (For Candidate's C	ommittees On	ly)		
7. Full Name of Candidate (Include any nickname.)	8. Party Affiliation or If Independent Candidate			
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence			
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY	
11. Check one:	i	Check one:		
Pre-Primary Pre-Election Annual Nomination Other		_ Pre-Conv	vention	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend Stat	tement of Organization.)	Post-Cor	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.		$\mathcal{O}$		
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.)	11/	<u> </u>		
15b. Unitemized				
15c. Add lines 15a and 15b in both columns.	TOTAL	<u> </u>		
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL 10	46		
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.	TOTAL			
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL C	<i>y</i>		
19. Debts OWED BY the committee (Use Schedule D.)				
20. Debts OWED TO the committee (Use Schedule E.)				
CERTIFICATION			FOR OFFICE USE ONLY	
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS T	RUE CORRECT AN		T L E D	
Signature of Treasurer Am C Title Charles The	Date (m)	pletayy)	N CLERKS OFFICE	
Signature (Candidate (if appricable)	Date (nd)		APR 1 2 2024	
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. files a fraudulent coronits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accura	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 3-9	1-4-16, IC 3-9-4-17, IC	3-9-4-18)	RK OF LA PORTE CIRCUIT COL	