REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)			(CFA-4) nmary Sheet FILE NUMBER
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.		1	-24-59 SIN ENTIRE CFA-4 REP
IS THIS AN AMENDMENT? 🗌 Yes 🖾 No			
	2		
1. Full Name of Committee (as on Statement of Organization) Check if this is a new	name		
TONY HENDRICKS FOR SURVEYOR COMMITTEE			
2. Acronym or Abbreviated Name (if any)	3. Coi	nmittee Telephone	e Number
·	(21	9)363-3808	
4. Mailing Address (address where all campaign finance correspondence is received)	heck if ti	nis is a new addres	5 S
6833 west Linda Lane	T		
5. City, State, ZIP Code	6. Par	ty Affiliation (if app	licable)DEMOCRATIC
Aichigan City, in 46360			
CANDIDATE INFORMATION (For Candidate's C			
7. Full Name of Candidate <i>(include any nickname)</i> ANTHONY (TONY) CHARLES HENDRICKS		ty Affiliation or If In DCRATIC	dependent Candidate
B. Office Sought (Include district number, if any. Not required for exploratory committee.)	10.0.		
	10. 60	unty of Residence	LA PORTE
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Signature of Candidate (*if applicable*) Date *MARNING*: 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 Class D 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)

CLERK OF LA PORTE CIRCUIT COURT