

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.

☐ No

(CFA-4) **Summary Sheet**

FILE NUMBER TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION				
1. Full 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 Telephone Number (219) 797 5735			
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check if this is a new	address.		
5. City, State, ZIP Gode, ANNA, IN 46340	6. Party Affiliation (if applicable)			
CANDIDATE INFORMATION (For Candidate's Committees Only)				
7. Full Name of Candidate (Include any nickname.) CLENN ALLEN WALLACE	8. Party Affiliation or If Independent Candidate REPUBLICAN			
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence LA PORTE			
TYPE OF REPORT		CONVENTION CAND	IDATES ONLY	
11. Check one: Pre-Primary Pre-Election Annual Nomination Other	Check on		ne: Convention	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend State	ement of Organization.)	Post-Convention		
12. Reporting Period (mm/dd/yy):	COL	_UMNA C	OLUMN B	
From: 01/01/2018 Through: 12/31/2022	This	s Period Ye	ar 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.			0	
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (Use Schedule A.)		Q	0	
15b. Uniternized				
15c. Add lines 15a and 15b in both columns.	OTAL	0	0	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	0	0	
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		0	Q	
17b. Unitemized		0	0	
17c. Add lines 17a and 17b in both columns.	TOTAL	0	\mathcal{O}_{-}	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL .	0	0	
19. Debts OWED BY the committee (Use Schedule D.)		0		
20. Debts OWED TO the committee (Use Schedule E.)		0.		
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CERTIFICATION I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TI	PLIE COPPECT AND C	OMPLETE E I	CEUSE HINLY D	
Signature of Treasurer Title	Date (mm/de	d/yy) IN CLE	RKS OFFICE	
Signature of Carolidate (if applicable) Wallace	Date (mm/di	12024	7 2024	
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accura Campaign Finance Law commits a Class B misdemeanor. (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-	te report as required by	the Indiana	PORTE CIRCUIT CO	