REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R17 / 8-23) Indiana Election Division (IC 3-9-5-14)		×4	(CFA- Summary	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.		OTAL P	46-2 AGES IN ENTIR	3-97 E CFA-4 REPORT
IS THIS AN AMENDMENT? Yes No			3	
1. Full Name of Committee (as on Statement of Organization)	/ name.		۰ ۰	
2. Acronym or Abbreviated Name (if any)	3. Com (21		phone Number -3113	
4. Mailing Address (Address where all campaign finance correspondence is received.)	Check if th	is is a new	address.	
5. City, State, ZIP Code La Porte, IN 46350	6. Party Reput		(if applicable)	
CANDIDATE INFORMATION (For Candidate's	Committe	es Only)		
7. Full Name of Candidate (Include any nickname.)	-		or if Independent	Candidate
Michael Rosenbaum	Repu		,	
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Cou La Po	nty of Res rte	idence	
TYPE OF REPORT			CONVENTION	CANDIDATES ONLY
11. Check one:			Check one:	
Pre-Primary Dere-Election Manual Nomination Deter			Pre-Conver	
Final / Disbands Committee (Lines 18, 19, and 20 must be 10".) Outgoing Treasurer (Within ten (10) days amend St	tatement of Org	anization.)	Post-Conve	ention
12. Reporting Period (mm/dd/yy): From: 01/01/2023 Through: 12/31/2023			LUMN A s Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			425,24	
14. Cash on hand and investments January 1, current year.				425.2
CONTRIBUTIONS AND RECEIPTS			1	
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (Use Schedule A.)			4,535.27	4,535.2
15b. Unitemized	BTOTAL		4,535.27	4,535.2
			4,960.51	4,960.5
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL		4,000.07	4,900.0
(Note: These amounts include in-kind expenditures and loan repayments.)			3,516.80	3,516.8
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			362.99	362.9
17b. Uniternized	BTOTAL		3,879.79	3,879.7
	TOTAL		1,080.72	1,080.7
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)			0.00	1,000.1
19. Debts OWED BY the committee (Use Schedule D.)				
20. Debts OWED TO the committee (Use Schedule E.)			0.00	

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CER	THEATION		TUE
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES	T OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CO	ORRECT AND COMPLETE.	IN CLERKS OFFICE
Signature of reasurer	Title Treasurer ³	Date (mm/dd/yy) 01/18/2024	
Signature of Candidate of epopulable)	-	Date (mm/dd/jy) 01/18/2024	JAN 232024
WARNING: 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 knowing	
files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A pr Campaign Finance Law commits a Class B misdemeanor. (IC 3-14-1-14)	erson who laws to the a complete or accurate report and may be subject to civil penalties. (/C 3-9-4-16, /C	3-9-4-17, (C 3-9-4-18)	RK OF LA PORTE CIRCUIT COURT

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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, labor organizations and other entities OVER \$100 per recipient, within a catendar 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 NUMBER					
46-22-62					
Page _	2	_of_	3		

RECIPIENT'S NAME AND MAILING ADDRESS (street, number. city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code A Relay for Life c/o June Lenig - 112 W Powell Drive La Porte, IN 46350	Charitbale Organization	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Advertizing	\$140.00	\$140.00	03/16/2023
Code F Hawkins Print Shop 315 Lincolnway La Porte, IN 46350	Print Shop	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Invitations	\$345.40	\$345.40	05/08/2023
Code F Al's Supermarket 702 E Lincolnway La Porte, IN 46350	Grocery Store	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Liquor & supplies	\$659.11	\$659.11	04/15/2023
Code F GFS 4421 Franklin St Michigan City, IN 46360	Grocery Store	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Supplies	\$110.68	\$110.68	06/07/2023
Code F LIQGO - Trangle Liquors 5503 Franklin St Michigan City, IN 46360	Liquor Store	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Liquor & Supplies	\$128.37	\$128.37	06/07/2023
Code F Café Trilogy 150 Legacy Plaza W, Suite B, La Porte, IN 46350	Restaurant & Caterer		\$280.00	\$280.00	06/08/2023
Code F City of La Porte Parks & Recreation 250 Pine Lake Avenue La Porte, IN 46350	Government Agency	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Facility rental	\$165.00	\$165.00	06/08/2023
TOTAL OF ALL P	GE OF SCHEDULE B E LAST PAGE ONLY the Summary Sheet.)	\$ 1,826.56 \$			



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 <u>totaled on ITEM 17a</u> 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 schedule.

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER						
46-22-62						
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 Relay for Life c/o June Lenig - 112 W Powell Drive La Porte, IN 46350	Charitable Organization	Direct In-Kind Peyment of Debt Returned Contribution Other Purpose: Advertisement	\$300.00	\$300.00	06/19/2023
Code C La Porte Agriculture Association 2512 IN-2 La Porte, IN 46350	Charitable Organization	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Donation	\$1,388.24	\$1,388.24	07/17/2023
Code		Direct In-Kind Payment of Debt Returned 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:			
Code		Direct In-Kind Payment of Debl Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	•		
	SUBTOTAL THIS PAG	SE OF SCHEDULE B	\$ 1,688.24		• • • • • • • • • • • • • • • • • • •
TOTAL OF ALL PA	^{\$} 3,516.80				

REPORT OF RECEIPTS AN OF A POLITICAL COMMITS State Form 4606 (R17 / 8-23) Indiana Election Division (IC 3-9-5-14)			Sumn	CFA-4) nary Sheet	
INSTRUCTIONS: Please type or print legibly IN BLACK INK assistance in completing this form, see instructions on the rev	all information on this form. For rerse side.	77	46	6-22-62	
IS THIS AN AMENDMENT? Ves	□ No		OTAL PAGES IN	ENTIRE CFA-4 F	REPORT
	COMMITTEE INFORMATION			-	·
1. Full Name of Committee (as on Statement of Organize Committee to Elect Mike Ro		name.			
2. Acronym or Abbreviated Name (if any)			ittee Telephone Nu		
4. Mailing Address (Address where all campaign finance 1515 Indiana Ave	correspondence is received.)	· · · · · · · · · · · · · · · · · · ·	is a new address.	<u></u>	
5. City, State, ZIP Code LaPorte, IN 46350		6. Party A	Affiliation (if application appli application application application application applicat	ble)	
	NFORMATION (For Candidate's C	omnittee	s Only)		
7. Full Name of Candidate (Include any nickname.) Michael Rosenbaum			Affiliation or If Indep	endent Candidate	
9. Office Sought (Include district number, if any. Not requ	ired for exploratory committee.)		ly of Residence		
TYPE OF	REPORT		CONVE	NTION CANDIDATE	ES ONLY
11. Check one:			Check o		
Pre-Primary Pre-Election Annual Nomination		<u>-</u>		-Convention	
Final / Disbands Committee (Lines 18, 19, and 20 must be '0".)	Dutgoing Treasurer (Within ten (10) days amend State	ment of Organi	zation.) Pos	st-Convention	·
12. Reporting Period (mm/dd/yy): From: 01-01-2023 Thro	ugh: 12-31-2023		COLUMN A This Period	COLUM Year to D	-
13. Cash on hand and investments at the beginning of this			425.2	24	
14. Cash on hand and investments January 1, current year					25.24
CONTRIBUTIONS AN (Note: these amounts include in-kind contributions and los					
15a. Itemized (Use Schedule A.)	ins, as well as cash contributions.)		2 025 0		5 00
15b. Unitemized	······································		2.825.0		<u>5.00</u>
15c. Add lines 15a and 15b in both columns.	SUBT		<u>1.710.2</u> 4.535.2		0.27
16. Add lines 13 and 15c in Column A and lines 14 and 15		OTAL	4.960.5		
EXPENDITUR			000.0	<u>, 1 4.30</u>	0.51
(Note: These amounts include in-kind expenditures and los	an repayments.)	-			
17a. Itemized (Use Schedule B.) (Public Question: use Sci	hedule C.)		3,516.8	3.51	6.80
17b. Unitemized			362.9	9 36	2.99
17c. Add lines 17a and 17b in both columns.	SUBT	OTAL	3.879.7	9 3.87	9.79
18. Cash on hand and investments at close of this reporting period	(Subtract 17c from 16 in both columns.)	TOTAL	<u> 1.08</u> 0.7	2 1.08	0.72
19. Debts OWED BY the committee (Use Schedule D.)					
20. Debts OWED TO the committee (Use Schedule E.)	· · · · · · · · · · · · · · · · · · ·				
	RTIFICATION			FOR OFFICE USE	ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BE	ST OF MY KNOWLEDGE AND BELIEF IT IS TRU	UE, CORREC	T AND COMPLETE	FIL	ED
Signature of Treasure		Date	(<i>mm/dd/yy</i>) 3/20/24	IN CLERKS	-
Signature of Candidate (H applicable)		Date	(mm/dd/yy)	1.	
WARNING: Any information contained in this report may not be copied files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A	I for sale or used for any commercial purpose. (//	294514	3/20/24 erson who knowingly	APR - 3	2024
Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-13) A	and may be subject to civil penalties. (IC 3-9-4-	16, IC 3-9-4-1	useu by the Indiana 7, IC 3-9-4-18)] [
				CLERK OF LA PORTE	
				E	X.4

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 <u>totaled on ITEM 15a</u> 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 loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, 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 least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE	NUMBE	R	
	46	-22-6	2	
Page	2	of	6	

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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
1. John Jones	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
5385 N Johnson Rd	Direct			
Michigan City, IN 46360	In-Kind (describe)			5/26/23
				0/20/20
2 m	Other Receipts:	250.00	250.00	
Contributor's Occupation (Il required) Insur Agent				
2 Matt Reardon	Contributions:			
5920 Hohman Ave	Direct		1	
Hammond, IN 46320	In-Kind (describe)			5/26/23
	Other Receipts:	250.00	250.00	
	Loan			
	Miscellaneous (specify)			
Contributor's Occupation (if required) Consultant		ĺ		
3. Amber Zdankiwicz	Contributions:			
379 E 1108 N	Direct			
Chesterton, IN 46304	In-Kind (describe)			6/12/23
	Other Receipts:	750.00	750.00	
	Interest 🗋 Loan			
	Miscellaneous (specify)			1
Contributor's Occupation (if required)				
4. S Kosmyna Skwiat	Contributions:			
448 N Shebel Road	Direct			
Michigan City, IN 46360	In-Kind (describe)			6/12/23
	Other Receipts:	750.00	750.00	
	Interest Loan Miscellaneous (specify)			
Contributor's Occupation (il required)				
5. Marlee Doms	Contributions:			
566 Wozniak Road				6/10/00
LaPorte, IN 46350	In-Kind (describe)			6/12/23
		500 00	500 00 L	
	Other Receipts:	500.00	500.00	· }
	Miscellaneous (specify)			
	in the second result (opposity)			}
Contributor's Occupation (if required)				
	HIS PAGE OF SCHEDULE A	<u>\$ 2500.00</u>		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



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

	FILE	NUME	BER	
	46	-22-	62	
Page	3	of	6	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street. number. city. state. ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
1. Andrew Skwiat	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
566 S Wozniak Road	Direct			
LaPorte, IN 4635	In-Kind (describe)			6/12/23
•	Other Receipts:	\$500.00	\$500.00	
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
2 Ronald Heeg & Heather Melton	Contributions:	·		
5161 North Cameron	Direct	.	1 1	
LaPorte, IN 46350	In-Kind (describe)			6/12/23
	Other Receipts:	\$375.00	\$375.00	
	Interest Loan	0.00	φ070.00	
	Miscellaneous (specify)			
Contributor's Occupation (if required)				·
3. Philip Sherlock	Contributions:			<u> </u>
9755 N 600 W	Direct			
Michigan City, IN 46360	In-Kind (describe)			6/12/23
	Other Receipts:	\$200.00	\$200.00	
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
4.	Contributions:			
	Direct			
	L In-Kind (describe)			
	Other Receipts:		ł	
	Interest Loan Miscellaneous (specify)			
Contributor's Occupation (il required)				
5.				
-	Contributions:		.	
	In-Kind (describe)			
	Other Receipts:			
	🔲 Interest 🛄 Loan			j
	Miscellaneous (specify)			
Contributor's Occupation (if required)				
	HIS PAGE OF SCHEDULE A	\$1,075.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		

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-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS 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 labor organizations 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).

	FILE	NUMBE	R		
46-22-62					
Page	4	of	6		

CONTRIBUTOR'S FULL NAME AND 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 _y) RECEIVED BY
 La Porte FOP Lodge 54 1206 Michigan Avenue La Porte, IN 46350 	Contributions: Direct In-Kind (describe)			6/12/23
	Other Receipts:	250.00	250.00	
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts; Interest Loan Miscellaneous (specify)			
	HIS PAGE OF SCHEDULE A	\$ 250.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$2,825.00		

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 B) ITEMIZED EXPENDITURES

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FILE NUMBER

46-22-62

Street Runtber, city, state, 2/8 code) OFFICE SOUGHT (if applicable) PURPOSE in secretel Add/out THSE CUUVE AVE Street Runtber, city, state, 2/8 code) Direct Street Runtber, city, state, 2/8 code) Other Street Runtber, city, state, 2/8 code Direct Im Kdat Purpose Rundber, city, state, 2/8 code) Direct Street Runtber, city, state, 2/8 code) Direct Street Runtber, city, state, 2/8 code) Direct Im Kdat Purpose Rundber, city, state, 2/8 code) Direct Street Runtber, city, state, 2/8 code) Direct Street Runtber, city, state, 2/8 code) Direct Im Kdat Purpose Rundber, city, state, 2/8 code) Direct Street Runtber, city, state, 2/8 code) Direct Direct Im Kdat Purpose Rundber, city, state, 2/8 code) Direct Direct State, 2/8 code) Direct Direct State, 2/8 code) Direct	RECIPIENT'S NAME AND MAILING ADDRESS RECIPIENT'S OCCUPATION				Page 🕹	_of6
Relay for Life Charitbale Organization Image: Charitb	,street, number, city, state, ZIP code)		and and	AMOUNT TH	IS CUMULATIV	
Code F Print Shop Print Shop Print Shop Print Shop Print Shop HawKins Print Shop Print Shop Print Shop Payment of Det Payment of Det \$345.40 \$345.40 \$345.40 \$345.40 \$345.40 \$345.40 \$345.40 \$345.40 \$345.40 \$345.40 \$506/20 Code F Invitations Payment of Det Invitations \$659.11 \$659.11 \$4559.11 \$415/202 N's Supermarket Oc Coc F One Payment of Det Invitations \$659.11 \$415/202 Code F One Payment of Det Invitations \$659.11 \$659.11 \$4110.68 \$110.68 \$110.68 \$110.68 \$659.11 \$669.77/202 Code F One	Relay for Life c/o June Lenig - 112 W Powell Drive	Charitbale Organization	Payment of Debt Returned Contribution Other Purpose:	_ \$140.00	\$140.00	03/16/20
NS Supermarket Grocery Store Direct In-Kind V02 E Lincolnway Retired Contribution \$659.11 \$659.11 04/15/202 Index F Grocery Store Direct In-Kind \$659.11 04/15/202 Sode F Grocery Store Direct In-Kind \$110.68 \$110.68 \$06/07/202 Gode F In-Gode Payment of Dett In-Kind Payment of Dett \$128.37 \$128.37 \$06/07/202 Icicular City, IN 46360 Liquor Store Payment of Dett In-Kind \$280.00 \$280.00 \$280.00 \$6/08/2023 de F In Gode In-Kind Payment of Dett In-Kind	Code F Hawkins Print Shop 315 Lincolnway La Porte, IN 46350	Print Shop		\$345.40	\$345.40	05/08/20
Grocery Store	_{Code} F Al's Supermarket 702 E Lincolnway .a Porte, IN 46350	Grocery Store	Payment of Debt Returned Contribution Other Purpose:	\$659.11	\$659.11	04/15/202
Image Liquors Liquor Store Image Liquors Image Liquors 503 Franklin St Image Liquor Store Image Payment of Debt Image Returned Contribution Ichigan City, IN 46360 Image Contribution \$128.37 \$128.37 \$6/07/2023 de F Image Contribution Image Contribution \$128.37 \$128.37 \$6/07/2023 de F Image Contribution Image Contribution Image Contribution \$128.37 \$128.37 \$6/07/2023 de F Image Contribution Image Contribution Image Contribution \$128.37 \$128.37 \$6/07/2023 de F Image Contribution Image Contribution Image Contribution \$128.37 \$128.37 \$6/07/2023 de F Image Contribution Image Contribution Image Contribution \$280.00 \$280.00 \$6/08/2023 porte, IN 46350 Government Agency Image Contribution Image Contribution \$165.00 \$165.00 \$6/08/2023 Porte, IN 46350 Image Contribution Image Contribution \$165.00 \$165.00 \$6/08/2023	GFS 1421 Franklin St Aichigan City, IN 46360	Grocery Store	Payment of Debt Returned Contribution Other Purpose:	\$110.68	\$110.68	06/07/202
de F	IQGO - Trangle Liquors 503 Franklin St lichigan City, IN 46360	Liquor Store	Payment of Debt Returned Contribution Other Purpose:	\$128.37	\$128.37	06/07/202:
y of La Porte Parks & Recreation Government Agency Payment of Debt D Pine Lake Avenue Returned Contribution \$165.00 \$165.00 Porte, IN 46350 Other Purpose: \$165.00 \$165.00	ifé Trilogy 0 Legacy Plaza W, Suite B, Porte, IN 46350	Restaurant & Caterer	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$280.00	\$280.00	06/08/2023
	y of La Porte Parks & Recreation Pine Lake Avenue Porte, IN 46350	Government Agency	Payment of Debt Returned Contribution Other Purpose:	\$165.00	\$165.00	06/08/2023

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R17/8-23)

Indiana Election Division (IC 3-9-5-14)

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(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

Page

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, 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 schedule.

FILE NUMBER

46-22-62 6 of 6

RECIPIENT S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION TYPE OF EXPENDITU				
street, number, city, state, ZIP code;	OFFICE SOUGHT (if applicable)		AMOUNT THIS	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE Imm dd yyl
<u>Code A</u> Relay for Life c/o June Lenig - 112 W Powell Drive La Porte, IN 46350	Charitable Organization	Direct In-Kind Payment of Dett Returned Contribution Other Purpose: Advertisement	\$300.00	*\$300.00	06/19/2023
Code C La Porte Agriculture Association 2512 IN-2 La Porte, IN 46350	Charitable Organization	Direct in Kind Payment of Debt Returned Contribution Other Purpose: Donation	\$1,388.24	\$1,388.24	07/17/2023
Code		Direct Direct In-Kind Payment of Debt Returned 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:			
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Code		Direct I In-Kind Payment of Debt Returned Contribution Other			
	SUBTOTAL THIS PAGE	OF SCHEDULE B \$	1,688.24		
TOTAL OF ALL PAGE	S OF SCHEDULE B ON THE L Enter total on ITEM 17a of the	AST PAGE ONLY	3,516.80		