

416-24-76



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) Summary Sheet

Table with 2 columns: Field Name, Value. Fields: FILE NUMBER (7262), TOTAL PAGES IN ENTIRE CFA-4 REPORT (3)

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

COMMITTEE INFORMATION

1. Full name of committee (as on Statement of Organization) Better Government for Long Beach
2. Acronym or abbreviated name, if any
3. Committee telephone number (219) 879-5164
4. Mailing address (address where all campaign finance correspondence is received) 2604 ORIOLE TRAIL
5. City, state, ZIP code LONG BEACH IN 46360
6. Party affiliation (if applicable)

CANDIDATE INFORMATION (For Candidate's Committee Only)

7. Full name of candidate (include any nickname)
8. Party affiliation or if independent
9. Office sought (include district number, if any. Not required for exploratory committee.
10. County of residence

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. PreElect Final
12. Check one: [] Pre-Convention [] Post-Convention
12. Reporting period: From: 04/13/2024 Through: 10/11/2024
13. Cash on hand and investments at the beginning of this reporting period. 2,191.58
14. Cash on hand and investments January 1, current year. 2,729.52

CONTRIBUTIONS AND RECEIPTS

(Note: These amounts include in-kind contributions and loans, as well as cash contributions.)

Table with 3 columns: Description, Column A (This Period), Column B (Year to Date). Rows: 15a. Itemized (use Schedule A) 0.06, 0.12; 15b. Unitemized 0.00, 0.00; 15c. Add lines 15a, and 15b in both columns SUBTOTAL 0.06, 0.12; 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL 2,191.64, 2,729.64

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

Table with 3 columns: Description, Column A (This Period), Column B (Year to Date). Rows: 17a. Itemized (use Schedule B) (Public Question: use Schedule C) 2,191.64, 2,729.64; 17b. Unitemized 0.00, 0.00; 17c. Add lines 17a and 17b in both columns SUBTOTAL 2,191.64, 2,729.64; 18. Cash on hand and investments at close of this reporting period(subtract 17c from 16 in both columns) TOTAL 0.00, 0.00; 19. Debts OWED BY the committee (use Schedule D) 0.00; 20. Debts OWED TO the committee (use Schedule E) 0.00

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer: Signature Included, Title: Treasurer, Date: 07/14/2024
Signature of Candidate (if applicable): Signature Included, Date: 07/14/2024

FOR OFFICE USE ONLY

Filed: Online 7/14/24 12:30 pm

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 knowingly files a fraudulent report commits a Level 6 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, 3-9-4-17, 3-9-4-18.)



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**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

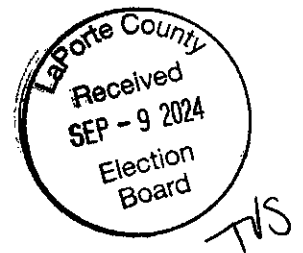
State Form 4506 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-5)
CONTRIBUTIONS BY
OTHER ORGANIZATIONS**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND 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 other entities **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of the amount from candidate's, legislative caucus, and regular party committees **MUST** be itemized on this schedule. 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).

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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
				RECEIVED BY
1 Horizon Bank 515 Franklin Square Michigan City IN 46369	Other Receipt: Interest	0.06	0.12	06/30/2024
				Mary Kowalski
SUB TOTAL THIS PAGE OF SCHEDULE A		\$ 0.06		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$ 0.06		





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

**(CFA-4 SCHEDULE B)
Itemized Expenditures**

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures listed 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.

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)				
Code: Contributions 1 Nest Community Shelter 1001 West 8th Street Michigan City IN 46360		Direct Purpose: Disperse / donate remaining funds to 501(c) (3) organization - Nest	2,191.64	2,191.64	07/09/2024
SUB TOTAL THIS PAGE OF SCHEDULE B			\$ 2,191.64		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 2,191.64		

