REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE
State Form 4606 (R15 / 5-19)
Indiana Election Division (IC 3-9-5-14)

(CFA-4)
Summary Sheet

FILE NUMBER

46-25-82

TOTAL PAGES IN ENTIRE CFA-4 REPORT

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 ☑ No

COMMITTEE INFORMATION

1. Full Name of Committee (as on *Statement of Organization*) ☐ Check if this is a new name.

Citizens For Scott Bell

2. Acronym or Abbreviated Name *(if any)*

3. Committee Telephone Number

(219) 221-1009

4. Mailing Address *(Address where all campaign finance correspondence is received.)* ☐ Check if this is a new address.

106 Whippoorwill Ave

5. City, State, ZIP Code

Trail Creek, IN 46360

6. Party Affiliation *(if applicable)*

Democratic

CANDIDATE INFORMATION *(For Candidate's Committees Only)*

7. Full Name of Candidate *(Include any nickname.)*

Scott Bell

8. Party Affiliation or If Independent Candidate

Democratic C

9. Office Sought *(Include district number, if any. Not required for exploratory committee.)*

N/A

10. County of Residence

LaPorte

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. **Check one:**

☐ Pre-Primary ☐ Pre-Election ☑ Annual ☐ Nomination ☐ Other _____

☐ Final / Disbands Committee *(Lines 18, 19, and 20 must be "0".)* ☐ Outgoing Treasurer *(Within ten (10) days amend Statement of Organization.)*

Check one:
☐ Pre-Convention
☐ Post-Convention

	COLUMN A This Period	COLUMN B Year to Date
12. Reporting Period *(mm/dd/vv)*: From: 1-1-2025 Through: 12-31-2025		
13. Cash on hand and investments at the beginning of this reporting period.	1752.46	
14. Cash on hand and investments January 1, current year.		1752.46

CONTRIBUTIONS AND RECEIPTS

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

15a. Itemized (Use Schedule A.)			
15b. Unitemized			
15c. Add lines 15a and 15b in both columns.	**SUBTOTAL**	-0-	-0-
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	**TOTAL**	1752.46	1752.46

EXPENDITURES

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

17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		1000.00	1000.00
17b. Unitemized			
17c. Add lines 17a and 17b in both columns.	**SUBTOTAL**	1000.00	1000.00
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	**TOTAL**	752.46	752.46
19. Debts OWED BY the committee (Use Schedule D.)			
20. Debts OWED TO the committee (Use Schedule E.)			

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: Scott Bell

Title: Treasurer

Date *(mm/dd/yy)*: 01-12-26
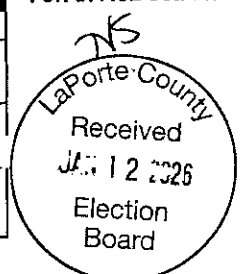
Signature of Candidate *(if applicable)*: Scott Bell

Date *(mm/dd/yy)*: 01-12-26

FOR OFFICE USE ONLY

LaPorte County
Received
JL 12 2026
Election Board

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, IC 3-9-4-17, IC 3-9-4-18)

REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE
State Form 4606 (R18 / 6-25)
Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

FILE NUMBER

Page 2 of 2

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 ___ LaPorte Co. Election Board 813 Lincolnway LaPorte, IN 46350	N/A	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☑ Other _Fine_ Purpose:	100.00	1000.00	5-24-25
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 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:			
SUBTOTAL THIS PAGE OF SCHEDULE B			$		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			$		

LaPorte County Received JAN 12 2026 Election Board