



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

State Form 4606 (R17/8-23)

Indiana Election Division (IC 3-8-5-14)

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.

IS THIS AN AMENDMENT? Yes No

**(CFA-4)
Summary Sheet**

FILE NUMBER

4410-24-98

TOTAL PAGES IN ENTIRE CFA-4 REPORT

5

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization)	<input type="checkbox"/> Check if this is a new name.
Committee to Elect Richard J. Mrozinski Jr	
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number
MOSE	(219) 1716-1395
4. Mailing Address (Address where all campaign finance correspondence is received.)	<input type="checkbox"/> Check if this is a new address.
2303 E 150 N	
5. City, State, ZIP Code	6. Party Affiliation (if applicable)
LA PORTE IN 46350	REPUBLICAN

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (Include any nickname.)	8. Party Affiliation or If Independent Candidate
RICHARD J. (MOSE) MROZINSKI JR	REPUBLICAN
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence
COUNTY COMMISSIONER DIST. 2	LA PORTE

TYPE OF REPORT

11. Check one:	Check one:
<input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other	<input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention
<input checked="" type="checkbox"/> Final / Disbands Committee (Lines 18, 19, and 20 must be '0'.) <input type="checkbox"/> Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)	

12. Reporting Period (mm/dd/yy): From: 12-31-2023	Through: 12-31-2024	COLUMN A This Period	COLUMN B Year to Date
		8556.82	8556.82
13. Cash on hand and investments at the beginning of this reporting period.			
14. Cash on hand and investments January 1, current year.			8556.82

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		- 0 -	- 0 -
15b. Unitemized		- 0 -	- 0 -
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	- 0 -	- 0 -

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		8556.82	8556.82
17b. Unitemized		- 0 -	
17c. Add lines 17a and 17b in both columns.	SUBTOTAL	8556.82	8556.82
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 -	

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 Richard J. Mrozinski Jr.	Title TREASURER	Date (mm/dd/yy) 12-27-2024
Signature of Candidate (if applicable) Richard J. Mrozinski Jr.		Date (mm/dd/yy) 12-27-2024

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)

FOR OFFICE USE ONLY

F I L E D
IN CLERKS OFFICE

DEC 27 2024

10.00
CLERK OF LA PORTE CIRCUIT COURT
Kb
Lester Stevens
10.00



**REPORT OF RECEIPTS AND EXPENDITURES
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Indiana Election Division (IC 3-9-5-14)

**(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES**

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

Page 1 of 5

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 <u>A</u> JUNE LENIG PLACEMENT FOR FUND RAISER		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	150.00	150.00	2-5-24
Code <u>A</u> WIMS Radio Michigan City Radio Spot		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	350.00	\$500	4-19-24
Code <u>A</u> LPCO SH&EA Committee SPONSOR		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	200.00	\$700	4-19-24
Code <u>C</u> Joe Winsti For TREASURER		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	500.00	\$1200.00	4-19-24
Code <u>A</u> LA PORTE RELAY FOR LIFE		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	300.00	1500	5-5-24
Code <u>A</u> LEADERSHIP LA PORTE FUND RAISER		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	320.00	\$1820	5-12-24
Code <u>A</u> Lions La Porte County FUND RAISER	FILED IN CLERK'S OFFICE DEC 27 2024 Lioness Stevens CLERK OF LA PORTE CIRCUIT COURT	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	300.00	\$2120	6-8-24
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 2120.00		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 8556.82		



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

(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

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FILE NUMBER

Page 3 of 5

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 LA PORTE Police Dept Fund Raiser		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	68.75	2188.75	6-11-24
Code A DOOR VILLAGE HARVEST FEST Ad		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	150 ⁰⁰	2338.75	6-18-24
Code C RANDY NOVAK FOR COMMISSIONER DONATION		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	300 ⁰⁰	2638.75	6-22-24
Code C LA PORTE DEMOCRATS SALUTE TO LABOR DONATION		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	250 ⁰⁰	2888.75	8-18-24
Code C Mike Kellams For COMMISSIONER DONATION		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	300 ⁰⁰	3188.75	8-22-24
Code C JANE BERNARD Animal ADOPTION CENTER DONATION		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	500 ⁰⁰	3688.75	8-22-24
Code C Hoosier Navy Inc. DONATION	F T L E IN CLERKS OFFICE DEC 27 2024 V.B. 30 Lester Stevens CLERK OF LA PORTE CIRCUIT COURT	<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	500 ⁰⁰	4188.75	11-14-24
SUBTOTAL THIS PAGE OF SCHEDULE B \$4188.75					
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.) \$ 8556.82					



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**(CFA-4 SCHEDULE B)
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FILE NUMBER

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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 <u>D</u> THE PAX CENTER DONATION		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	500 ⁰⁰	4688.75	11-27-24
Code <u>D</u> LA Porte County FAIRBOARD Donation		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	1000 ⁰⁰	5688.75	11-27-24
Code <u>D</u> CENTER Township for the People Donation		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	500 ⁰⁰	6188.75	12-6-24
Code <u>D</u> ROLLING PRAIRE UNITED METHODIST FOOD PANTRY		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	500	6688.75	12-18-24
Code <u>D</u> SONS OF UNION VETERANS OF THE CIVIL WAR		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	500	7188.75	12-18-24
Code <u>D</u> LA Porte County Historical Society		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	500	7688.75	12-21-24
Code <u>D</u> Relay for Life PANCAKE BREAKFAST	FILED IN CLERKS OFFICE DEC 27 2024 VJD 10/2024 Leanne Stevens CLERK OF LA Porte CIRCUIT COURT	<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	140	7828.75	5-5-24
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 3640		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$ 8556.72		



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Code D Mike Kellens for co. commissioner		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	200	802.75	9-13-24
Code A Leadership Institute		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____	528.76	8556.82	12-27-24
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$268.76		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$8556.82		

FILED

IN CLERK'S OFFICE

DEC 27 2024

10:00 AM
Lorraine Stevens