



# 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)

## Summary Sheet

FILE NUMBER

0416-24-98

TOTAL PAGES IN ENTIRE CFA-4 REPORT

5

**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.

COMMITTEE TO ELECT RICHARD J. MROZINSKI JR

2. Acronym or Abbreviated Name (if any)

MOSE

3. Committee Telephone Number

(219) 716-1395

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

2303E 150N

5. City, State, ZIP Code

LAPORTE IN 46350

6. Party Affiliation (if applicable)

REPUBLICAN

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

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

RICHARD J. (MOSE) MROZINSKI JR

8. Party Affiliation or If Independent Candidate

REPUBLICAN

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

COUNTY COMMISSIONER DIST. 2

10. County of Residence

LAPORTE

### TYPE OF REPORT

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

12. Reporting Period (mm/dd/yy):

From: 12-31-2023 Through: 12-31-2024

COLUMN A  
This Period

COLUMN B  
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

8556.82

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

Kevin G. Mrozinski

Title

TREASURER

Date (mm/dd/yy)

12-27-24

Signature of Candidate (if applicable)

Richard J. Mrozinski Jr.

Date (mm/dd/yy)

12-27-24

**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

FILED  
IN CLERKS OFFICE

DEC 27 2024

CLERK OF LA PORTE CIRCUIT COURT



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State Form 4606 (R17 / 8-23)  
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## (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 4 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 PLACE MAT FOR FUNDS 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. <sup>00</sup>	150. <sup>00</sup>	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. <sup>00</sup>	500	4-19-24
Code <u>A</u> LPCO SHEEP 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. <sup>00</sup>	8500	4-19-24
Code <u>C</u> JOIE WINSKI 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. <sup>00</sup>	81200. <sup>00</sup>	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. <sup>00</sup>	7500	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. <sup>00</sup>	81820	5-12-24
Code <u>A</u> LIONS LA PORTE CNTY 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:	300. <sup>00</sup>	82120	6-8-24
<b>FILED</b> <b>IN CLERKS OFFICE</b>  <b>DEC 27 2024</b>  <b>KD 10:30</b>  <b>Heather Stevens</b> <b>CLERK OF LA PORTE CIRCUIT COURT</b>					
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>			\$ 2120. <sup>00</sup>		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> (Enter total on ITEM 17a of the Summary Sheet.)			\$ 8556. <sup>00</sup>		



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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>A</u> LA PORTE POLICE DEPT FUNDRAISER		<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 <u>A</u> 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 <sup>00</sup>	2338.75	6-18-24
Code <u>C</u> 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 <sup>00</sup>	2638.75	6-22-24
Code <u>C</u> LA PORTE DEMOCRATS DONATE 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 <sup>00</sup>	2888.75	8-18-24
Code <u>C</u> MIKE KELLEMS 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 <sup>00</sup>	3188.75	8-22-24
Code <u>C</u> 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 <sup>00</sup>	3688.75	8-22-24
Code <u>C</u> HOOSIER NAVY INC 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 <sup>00</sup>	4188.75	11-14-24
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <b>FILED</b> IN CLERKS OFFICE  DEC 27 2024  CLERK OF LA PORTE CIRCUIT COURT </div>			4188.75		
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>			8269.75		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> (Enter total on ITEM 17a of the Summary Sheet.)			\$ 8556.82		



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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 <sup>00</sup>	4688.75	11-27-24
Code <u>D</u> LA PORTE CNTY 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 <sup>00</sup>	5688.75	11-27-24
Code <u>D</u> CENTERTOWNSHIP 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 <sup>00</sup>	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>A</u> RELAY FOR LIFE PANCAKE BREAKFAST		<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:	140	7828.75	5-5-24
<b>FILED</b> IN CLERKS OFFICE DEC 27 2024 KID WISDOM KLEMON STEVENS CLERK OF LA PORTE CIRCUIT COURT					
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 <u>D</u> MILE KELLEMS 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	808.75	9-13-24
Code <u>A</u> LEADERSHIP LAPORE		<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: _____			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$208.76		
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 CLERKS OFFICE

DEC 27 2024

KB  
Helen Stevens 10-30am