CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

(CFA-1)

State Form 4604 (R15 / 5-19)
Indiana Election Division (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

1. IS THIS AN AMENDMENT? ☐ Yes ☒ No *If Yes, please enter the file number in this box.* → **FILE NUMBER** 46-25-95

SECTION A. CANDIDATE INFORMATION: *Fill in all applicable boxes as fully and accurately as possible.*

2. Last Name	First Name	Middle Name	Nickname	3. Type of Committee (Check one)
GRAMAROSSA	CONNIE	D	—	☒ Candidate's Principal Committee ☐ Exploratory Committee

4. Mailing Address (number and street, city, state, and ZIP code)	5. FAX (Optional)	6. E-mail Address (Optional)
335 LAKE HILL RD	( )	

7. City	State	ZIP Code	8. County	9. Telephone (Day)	10. Telephone (Evening)
MICHIGAN CITY	IN	46360	LAPORTE	(219) 221-7326	( )

11. Party Affiliation ☐ Democratic ☐ Libertarian ☒ Republican ☐ Other _____ **12. Office Sought** (Include district number, if any. Not required for an exploratory committee.)

SECTION B. COMMITTEE INFORMATION: *Fill in all applicable boxes as fully and accurately as possible.*

13. Full Name of Committee (Do not abbreviate.) ☐ Check if this is a new name.
FRIENDS OF CONNIE GRAMAROSSA

14. Mailing Address (number and street, city, state, and ZIP code) ☐ Check if this is a new address.	15. FAX (Optional)	16. E-mail Address (Optional)
335 LAKE HILL RD	( )	

17. City	State	ZIP Code	18. County	19. Telephone	20. Committee Organization Date (mm/dd/yy)
MICHIGAN CITY	IN	46360	LAPORTE	(219) 221-7326	

21. Chairperson's Full Name ☒ Designate Candidate as Chairperson. ☐ Check if this is a new chairperson.
Richard Gramarossa

22. Mailing Address (number and street, city, state, and ZIP code) ☐ Check if this is a new address.	23. FAX (Optional)	24. E-mail Address (Optional)
335 LAKE HILL	( )	

25. City	State	ZIP Code	26. County	27. Telephone (Day)	28. Telephone (Evening)
MICHIGAN	IN	46360	LAPORTE	(219) 221-7326	( )

29. Bank or Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.)
HORIZON BANK 3631 FRANKLIN ST MICHIGAN CITY 46360

30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.)

31. Salaries and Reimbursements (Will the committee pay the candidate a salary or reimbursement for lost wages? If Yes, attach a copy of the contract.) ☐ Yes ☒ No

SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)

32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee.

Person Appointed Treasurer	Signature of the Committee Chairperson
Richard Gramarossa	

33. Treasurer's Full Name ☐ Designate candidate as treasurer. ☐ Check if this is a new treasurer.
Richard J Gramarossa

34. Mailing Address (number and street, city, state, and ZIP code) ☐ Check if this is a new address.	35. FAX (Optional)	36. E-mail Address (Optional)
8444 N 500 E	( )	

37. City	State	ZIP Code	38. County	39. Telephone (Day)	40. Telephone (Evening)
Rolling Pr	IN	46371	LAPORTE	(219) 214 8044	( ) SAME

SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)

41. I give notice that I accept the duties and responsibilities of Treasurer of this Committee. I am not the chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-7).

Signature of Person Accepting Appointment

SECTION E. CERTIFICATION OF STATEMENT

We certify as the candidate and the duly appointed Chairperson of the Committee and that we have examined this statement. To the best of our knowledge and belief it is true, correct and complete.

42. Typed or Printed Name of Chairperson	Signature of Chairperson	Date (mm/dd/yy)
Richard Gramarossa		1-15-26

43. Typed or Printed Name of Candidate	Signature of Candidate	Date (mm/dd/yy)
Connie Gramarossa		1-20-26

Warning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Level 6 D 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, and IC 3-9-4-18).

FOR OFFICE USE ONLY

NS
LaPorte County
Received
JAN 20 2026
Election Board

OF A POLITICAL COMMITTEE

State Form 4606 (R18 / 6-25)
Indiana Election Division (IC 3-9-5-14)

(CFA-4) 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.

IS THIS AN AMENDMENT? ☐ Yes ☆ No

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPO

COMMITTEE INFORMATION

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

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number
(219) 221 7226

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

5. City, State, ZIP Code
Michigan City IN 46360

6. Party Affiliation (if applicable)

CANDIDATE INFORMATION (For Candidate's Committees Only)

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

8. Party Affiliation or If Independent Candidate
Republican

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

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.)

CONVENTION CANDIDATES ONLY
Check one:
☒ Pre-Convention
☐ Post-Convention

12. Reporting Period (mm/dd/yy):
From: JAN 15,25 Through: JAN 15,26

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		
14. Cash on hand and investments January 1, current year.	382.28	
CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		6240.49
15a. Itemized (Use Schedule A.)	13,650-	13,650.-
15b. Unitemized		
15c. Add lines 15a and 15b in both columns. SUBTOTAL	13,650-	13,650.-
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL	14,032.28	14,032.28
EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	7,795.79	7,795.79
17b. Unitemized		
17c. Add lines 17a and 17b in both columns. SUBTOTAL	7,795.79	7795.79
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) TOTAL	6240.49	6240.49
19. Debts OWED BY the committee (Use Schedule D.)	12,650.-	
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.
If a Treasurer of a PAC: I have not knowingly or willfully received, solicited, or accepted, either directly or indirectly, contributions or expenditures from a foreign national that exceeds $50,000 within the four (4) years immediately preceding the date of the contribution. ☐ (please check box)

Signature of Treasurer: Richard Gramarossa — Title: Treasure — Date (mm/dd/yy): 1-15-26

Signature of Candidate (if applicable): Connie Gramarossa — Date (mm/dd/yy): 1-20-26

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

LaPorte County
Received
JAN 20 2026
Election Board

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 NUMBER

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 PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED *(mm/dd/yy)* RECEIVED BY
1. Connie Gramarossa 335 LAKE HILL Michigan City IN Contributor's Occupation *(if required)* CANDIDATE	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	1000.-		5-7-25 CK 152 Treasurer Rich. G
2. Connie Gramarossa 335 LAKEHILL Michigan City IN Contributor's Occupation *(if required)* CANDIDATE	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	1000.-	2000.-	6-30-25 CK 159 Treasurer Rich. G
3. ACE Auto Body 118 AUDLEY ST LAPORTE IN 46350 Contributor's Occupation *(if required)* GOLF OUTING	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	425.-		8-14-25 CK 10739 Treasurer Rich. G
4. BWG INS 1504 1ST ST LAPORTE IN 46350 HOLD SPONSER Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	100.-		8-7-25 CK 1231 Treasurer Rich. G
5. CENTRAL PAVING P.O BOX 357 LOGANSPORT, IN 46947 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	225.-		8-25-25 CK 405582 Treasurer Rich. G
	SUBTOTAL THIS PAGE OF SCHEDULE A	$2750.-		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*	$		

LaPorte County
Received
JAN 20 2026
Election
Board

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 NUMBER

Page 2 of 6

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 PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. SSCA 9102 N Meridian St Indy, IN 46260 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	425.-		8-26-25 CK 4284 Treasurer Rich.Q
2. DEBCO METAL P.O Box 8 Francesville IN 47946 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	350.-		8-25-25 CK 2565 Treasurer Rich.Q
3. Quick Towing 1209 E State Rd 2 LaPorte IN 46350 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	250.-		8-28-25 CK 0613 Treasurer Rich.Q
4. John Jones 168 Big Rock Pass Huntertown IN 46748 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	400.-		8-21-25 CK 2590 Treasurer Rich.Q
5. B&H 1580 E 90th Pl Merr IN 46410 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	850.-		9-6-25 CK 5558 Treasurer Rich.Q
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 2,275.-		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)	$		

LaPorte County Received JUL 20 2026 Election Board

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

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FILE NUMBER

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	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED *(mm/dd/yy)* RECEIVED BY
1. E. GIBSON 1410 COSSETT MILL CHESTERTON IN Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	425.-		9-17-25 CK 48 TREASURER RICH.G
2. C MILLER 10347 COLVILLE INDY IN 46236 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	525.-		9-4-25 CK 108 TREASURER RICH.G
3. LAW GROUP 1000 WASHINGTON MICHIGAN CITY 46360 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	400.-		9-9-25 CK 59 TREASURER RICH.G
4. M.C.R 1336 FRANKLIN PLWY MUNSTER IN 46321 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	600.-		9-15-25 CK 1290 TREASURER RICH.G
5. MICHAEL OBERFELL 118 BOULDER DR NOBLEVILL IN 46060 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	425.-		9-25 CK 205 TREASURER RICH.G
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 2375.-		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 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

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FILE NUMBER

Page 4 of 6

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 PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED *(mm/dd/yy)* RECEIVED BY
1. 407 SATA LANE LAPORTE IN 46350 Contributor's Occupation *(if required)*	Contributions: [X] Direct [ ] In-Kind *(describe)* Other Receipts: [ ] Interest [ ] Loan [ ] Miscellaneous *(specify)*	250.		9-25-25 CK 6055 TREASURE RICH. Q
2. MARY S LAKE 13950 OSBORNE RD WAKARUSA, IN Contributor's Occupation *(if required)*	Contributions: [X] Direct [ ] In-Kind *(describe)* Other Receipts: [ ] Interest [ ] Loan [ ] Miscellaneous *(specify)*	1000-		9-15-25 CK 3610 TREASURE RICH Q
3. FLOOR STORES P.O BOX 721 LAPORTE IN 46352 Contributor's Occupation *(if required)*	Contributions: [X] Direct [ ] In-Kind *(describe)* Other Receipts: [ ] Interest [ ] Loan [ ] Miscellaneous *(specify)*	100-		9-15-25 CK 42506 TREASURE RICH Q
4. ANTEO GROUP 369 WOODY PORTER IN 46304 Contributor's Occupation *(if required)*	Contributions: [X] Direct [ ] In-Kind *(describe)* Other Receipts: [ ] Interest [ ] Loan [ ] Miscellaneous *(specify)*	100-		9- 25 CK 4314 TREASURE RICH Q
5. Contributor's Occupation *(if required)*	Contributions: [ ] Direct [ ] In-Kind *(describe)* Other Receipts: [ ] Interest [ ] Loan [ ] Miscellaneous *(specify)*			
SUBTOTAL THIS PAGE OF SCHEDULE A		$ 1450-		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*		$		

LaPorte County Received JA 20 2026 Election Board

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

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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 PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED *(mm/dd/yy)* RECEIVED BY
1. AMANDA SANCHEZ 330 BUTLER ST MICHIGAN CITY IN 46360 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	375.-		9-18-25 TREASURER RICH Q
2. Richard Gramaglia 8444 N 500 E Rolling Pr. IN 46371 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	50/50 410.- RAFFLE 570.- RICH 20 TOTAL 1000.-		9-19-25 TREASURER RICH Q
3. Wigberto Cruz 509 VAIL ST Michigan City Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* CK Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	425.-		9-26-25 TREASURE RICH Q
4. TERRY BAKER 12836 E 196TH ST NOBLESVILLE IN. 46060 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	600.-	Received JAN 20 2026 Election Board	9-25-25 TREASURE RICH Q
5. BARNES & THORNBURG 11 S MERIDIAN ST INDY IN 46204 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	400.-		9-10-25 TREASURE RICH Q
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 2810.-		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 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

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FILE NUMBER

Page 6 of 6

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 PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED *(mm/dd/yy)* RECEIVED BY
1. PAUL SHAFFER 8835 N County Road 100 E BROWNSBURG IN 46112 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	100.-		9-3-25 CK 1008 TREASURER Rich C
2. D.L.Z 316 TECH DRIVE BORNS HARBOR IN 46304 Contributor's Occupation *(if required)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	425.-		9-19-25 CK 6123 Rich C
3. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
4. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
5. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
SUBTOTAL THIS PAGE OF SCHEDULE A		$ 525.-		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*		$ 12,175.-		

LaPorte County Received 12 2026 Election Board

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-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES 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 political action committees **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 amount from political action 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)*.

FILE NUMBER

Page 1 of 1

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/yy)* RECEIVED BY
1. COMMITTEE TO ELECT BOHACEK SENATE 220 POKAGON DR MICHIGAN CITY, IN	Contributions: ☒ Direct ☐ In-Kind *(describe)* CK 2010 Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* GOLF OUTING	500.-		9-19-25 RR
2. HERITAGE BUILDS PAC P.O BOX 66123 INDY IN, 46268	Contributions: ☒ Direct ☐ In-Kind *(describe)* CK 1066 Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	350.-		9-19-25 R.R
3. DPBQ POLITICAL ACTION COMMITTEE 9025 RIVER RD STE 200 INDY IN 46240	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	100.-		9-22-25 RR
4.	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
5.	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 950.-		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*	$ 950.-		

LaPorte County Received JAN 20 2026 Election Board

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R14 / 10-17)
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 calender year, MUST be itemized on this schedule (over $200 if regular party committee).

FILE NUMBER

Page 1 of 1

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 yy) RECEIVED BY
1. REGIONAL COUNCIL OF CARPENTERS INDIANA CODE 771 GREENWOOD SPRINGS DRIVE GREENWOOD IN 46143	Contributions: ☒ Direct ☐ In-Kind (describe) CK 3161 Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	525.-		9-19-25
2.	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)			R.9
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)			
SUBTOTAL THIS PAGE OF SCHEDULE A		$ 525.-		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		$ 525-		

LaPorte County Received [illegible] 2025 Election Board

SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT BY A CANDIDATE'S COMMITTEE ($1,000 CONTRIBUTIONS OR MORE)

(CFA-11)

State Form 48492 (R6 / 5-19)
Indiana Election Division (IC 3-9-5-20.1; 3-9-5-22)

INSTRUCTIONS: Only candidates receiving a "large contribution" are required to file this report. 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.

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-11 REPORT: 1

IS THIS AN AMENDMENT? ☐ Yes ☒ No

COMMITTEE INFORMATION

1. **Full Name of Candidate** *(include any nickname.)* ☐ Check if this is a new name.: Connie Gramarossa
2. **Committee Telephone Number**: (219) 214-8044
3. **Mailing Address** *(Address where all campaign finance correspondence is received.)* ☐ Check if this is a new address.: 335 LAKEHill Rd
4. **City**: Michigan City | **State**: IN | **ZIP Code**: 46360
5. **Party Affiliation or If Independent Candidate**: REPUBLIAN
6. **Office Sought** *(include district number, if any. Not required for exploratory committee.)*:
7. **County of Residence**: LAPORTE
8. **Reporting Period** *(mm/dd/yy)*: From: JAN 15,25 Through: JAN 15,26

For classification, enter INDV for individual; PAC for political action committee; CORP for corporation; LAB for labor organization; OTHER for all entries which are not one of the above categories.

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE (DATE FOR LOAN OR OTHER RECEIPT)	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED RECEIVED BY
Classification 1. INDV MARTY S LAKE SOSAN AL ABBAS 13950 OSBORNE RD WAKARUSA, IN 46573 Contributor's Occupation *(if applicable)*	Contributions: ☒ Direct ☐ In-Kind *(describe)* CK 3670 Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* ON CFA-4 Also	1000.-	9-15-25 TREASURE R.Q
Classification 2. Connie Gramarossa 335 LAKEHill Michigan City IN CANDIDATE Contributor's Occupation *(if applicable)* Commissioner	Contributions: ☒ Direct ☐ In-Kind *(describe)* CK 152 & 159 Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* ON CFA-4 Also	2000.-	5-7-25 6-30-25 R.Q Treasure
Classification 3. Contributor's Occupation *(if applicable)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*		

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	Title	Date *(mm/dd/yy)*
[signature]	Treasure	JAN 15,26
Signature of Candidate *(if applicable)*		**Date** *(mm/dd/yy)*

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, and IC 3-9-4-18)*

FOR OFFICE USE ONLY

LaPorte County Received JAN 2 [illegible] Election Board

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 D) DEBTS OWED BY THIS COMMITTEE

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. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least $1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 1 of 1

CREDITOR'S OR LENDER S NAME AND MAIL NG ADDRESS (street, number, city, state, ZIP code)	ENDORSER S OR VENDOR S NAME AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT / NATURE OF DEBT	DATE DEBT INCURRED (mm dd yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Richard Gramgrossa 8414 N 500E Rolling Pr IN 46371		CARRYOVER FROM PREVIOUS REPORTS		12,650	12,650
LENDER'S OCCUPATION:		LOAN			
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
				SUBTOTAL THIS PAGE OF SCHEDULE D	$ 12,650
				TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.)	$ 12,650

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

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 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 Gordon Food 4421 Franklin Michigan City IN 46360	Food Golf outing	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	365.86	596.11	9-18-25
Code Whispering Pines 32280 St Rd 4 Walkerton IN	Rental of Golf Course	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	2300.-		9-20-25
Code Committee to Elect Jimmy Pressel	Donations	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	100.-		11-20-25
A Code Lamar Signs 454 North East Fort Wayne	Billboards	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other OK 163 Purpose:	3675.-		12-18-25
A Code WLOF-FM 1200 Lincolnway LaPorte IN 46350	AD	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other OK 105 Purpose:	160.-		11-27-25
Code Horizon Bank 515 Franklin St Michigan City IN 46360	Bank Fee	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			12 months
Code Gordon Foods 4421 Franklin Michigan City IN	Golf Outing	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	230.25		9-4-25
		SUBTOTAL THIS PAGE OF SCHEDULE B	$6951.11		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet.)*	$		

LaPorte County Received 12.[illegible].2026 Election Board

TO

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

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 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 A Reprographic Arts 2824 E Michigan Blvd Trail Creek, IN 46360	T-Shirts	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other CK161 Purpose:	536.85		7-7-25
Code Visitors Bureau Franklin St Michigan City IN 46360	Host Sponsor	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other CK104 Purpose:	100.-		12-3-25
Code Walmart 5780 Franklin Michigan City IN	Golf Outing	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other CK102 Purpose:	205.83		9-4-25
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:			
		SUBTOTAL THIS PAGE OF SCHEDULE B	$844.68		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet.)*	$7,795.79		

LaPorte County Received JAN 2026 Election Board