



**CANDIDATE'S STATEMENT OF ORGANIZATION AND
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE**
State Form 4604 (R15 / 5-19)
Indiana Election Division (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

(CFA-1)

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
SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.										
2. Last Name GRAMAROSSA		First Name CONNIE		Middle Name D		Nickname -		3. Type of Committee (Check one) ☒ Candidate's Principal Committee ☐ Exploratory Committee		
4. Mailing Address (number and street, city, state, and ZIP code) 335 LAKE HILL RD				5. FAX (Optional) ()		6. E-mail Address (Optional) ()				
7. City MICHIGAN CITY		State IN		ZIP Code 46360		8. County LAPORTE		9. Telephone (Day) (219) 221-7326		10. Telephone (Evening) ()
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) 335 LAKE HILL RD				15. FAX (Optional) ()		16. E-mail Address (Optional) ()				
17. City MICHIGAN CITY		State IN		ZIP Code 46360		18. County LAPORTE		19. Telephone (219) 221-7326		20. Committee Organization Date (mm/dd/yy) ()
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) 335 LAKE HILL				23. FAX (Optional) ()		24. E-mail Address (Optional) ()				
25. City MICHIGAN		State IN		ZIP Code 46360		26. County LAPORTE		27. Telephone (Day) (219) 221-7326		28. Telephone (Evening) ()
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. Richard Gramarossa				Person Appointed Treasurer Richard Gramarossa						
33. Treasurer's Full Name ☐ Designate candidate as treasurer. ☐ Check if this is a new treasurer. Richard J Gramarossa				Signature of the Committee Chairperson [Signature]						
34. Mailing Address (number and street, city, state, and ZIP code) 8444 N 500 E				35. FAX (Optional) ()		36. E-mail Address (Optional) ()				
37. City Rolling Pt		State IN		ZIP Code 46371		38. County LAPORTE		39. Telephone (Day) (219) 224 8044		40. Telephone (Evening) 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 [Signature]										
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 Richard Gramarossa				Signature of Chairperson [Signature]				Date (mm/dd/yy) 1-15-24		
43. Typed or Printed Name of Candidate Connie Gramarossa				Signature of Candidate [Signature]				Date (mm/dd/yy) 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										
76 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)

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

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization)
FRIENDS OF CONNIE GRAMAROSSA

☐ Check if this is a new name.

2. Acronym or Abbreviated Name (if any)

4. Mailing Address (Address where all campaign finance correspondence is received.)
335 LAKEHILL

3. Committee Telephone Number
(219) 221 7326

5. City, State, ZIP Code

MICHIGAN CITY IN 46340

☐ Check if this is a new address.

6. Party Affiliation (if applicable)

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

CONNIE GRAMAROSSA

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

8. Party Affiliation or If Independent Candidate
REPUBLICAN

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

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

14. Cash on hand and investments January 1, current year.

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.

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.

SUBTOTAL

TOTAL

COLUMN A
This Period

386.28

COLUMN B
Year to Date

6240.49

13,650.-

13,650.-

13,650.-

13,650.-

14,036.28

14,036.28

7,795.79

7,795.79

7,795.79

7,795.79

6240.49

6240.49

12,150.-

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

Signature of Candidate (if applicable)

Title

TREASURER

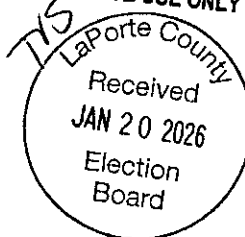
Date (mm/dd/yy)

1-15-26

Date (mm/dd/yy)

1-20-26

FOR OFFICE USE ONLY



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)

(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 1 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. Connie Gramarosa
335 LAKE HILL
MICHIGAN CITY IN

Contributions:
☒ Direct
☐ In-Kind (describe)
Other Receipts:
☐ Interest ☐ Loan
☐ Miscellaneous (specify)

1000.-

5-7-25
CK 152

Contributor's Occupation (if required) CANDIDATE

Treasurer
R.H.G.

2. Connie Gramarosa
335 LAKE HILL
MICHIGAN CITY IN

Contributions:
☒ Direct
☐ In-Kind (describe)
Other Receipts:
☐ Interest ☐ Loan
☐ Miscellaneous (specify)

1000.-

2000.-

6-30-25
CK 159

Contributor's Occupation (if required) CANDIDATE

Treasurer
R.H.G.

3. AGE AUTO BODY
118 AUDLEY ST
LAPORTE IN
46350

Contributions:
☒ Direct
☐ In-Kind (describe)
Other Receipts:
☐ Interest ☐ Loan
☐ Miscellaneous (specify)

425.-

8-14-25
CK 10739

Contributor's Occupation (if required) GOLF OUTING

Treasurer
R.H.G.

4. BW& INS
1504 1ST ST
LAPORTE IN
46350
HOLD SPONER

Contributions:
☒ Direct
☐ In-Kind (describe)
Other Receipts:
☐ Interest ☐ Loan
☐ Miscellaneous (specify)

100.-

8-7-25
CK 1231

Contributor's Occupation (if required)

Treasurer
R.H.G.

5. CENTRAL PAVING
P.O. BOX 357
LOGANSPORT, IN
46947

Contributions:
☒ Direct
☐ In-Kind (describe)
Other Receipts:
☐ Interest ☐ Loan
☐ Miscellaneous (specify)

225.-

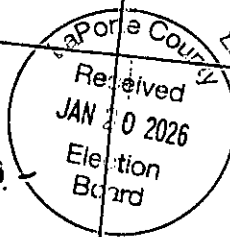
8-25-25
CK 405582

Contributor's Occupation (if required)

Treasurer
R.H.G.

SUBTOTAL THIS PAGE OF SCHEDULE A
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY
(Enter total on ITEM 15a of the Summary Sheet.)

\$2750.-
\$



**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 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/yyyy) RECEIVED BY
1. SSOA 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 4254 Treasurer Rich.Q
2. DEBLO 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 LAPORE 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 2500 Treasurer Rich.Q
5. B&H 1580 E 90TH PL MERT 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 TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$2,275.-		

Porte County
Received
Jul 20 2026
Election
Board
NS



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**
State Form 4606 (R17 / 8-23)
Indiana Election Division (IC 3-9-5-14)

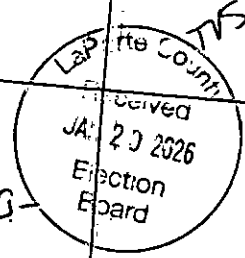
**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS**
Itemized Contributions and Other Receipts

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 totaling 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 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/yyyy) RECEIVED BY
1. E. GIBSON 140 ROSSETT MILL CHESTERTON IN Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	425.-		9-12-25 OKMB TREASURER RICH Q
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 OK108 TREASURER RICH Q
3. LAW GROUP 1000 WASHINGTON MICHIGAN CITY IN 46360 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	400.-		9-9-25 OK159 TREASURER RICH Q
4. M.B.R. 1336 FRANKLIN PLWY MUSKIE IN 46321 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	600.-		9-15-25 OK1290 TREASURER RICH Q
5. MICHAEL OBER PAUL 118 BOULDER DR NOBLEVILLE IN 46060 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	425.-		9-25 OK205 TREASURER RICH Q
SUBTOTAL THIS PAGE OF SCHEDULE A		\$2,375.-		
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

FILE NUMBER

Page 4 of 6

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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.

407 SARA LAND
LAPORE IN
46350

Contributions:
☒ Direct
☐ In-Kind (describe)
Other Receipts:
☐ Interest ☐ Loan
☐ Miscellaneous (specify)

250.

9-28-25
CK6055

TREASURER
RICH Q

Contributor's Occupation (if required)

2.

MARTY S LAKE
13950 OSBORNE RD
WAKARUSA, IN

Contributions:
☒ Direct
☐ In-Kind (describe)
Other Receipts:
☐ Interest ☐ Loan
☐ Miscellaneous (specify)

1000.-

9-15-25
CK3610

TREASURER
RICH Q

Contributor's Occupation (if required)

3.

FLOOR STORES
PO BOX 721
LAPORE IN
46352

Contributions:
☒ Direct
☐ In-Kind (describe)
Other Receipts:
☐ Interest ☐ Loan
☐ Miscellaneous (specify)

100.-

9-15-25
CK42506

TREASURER
RICH Q

Contributor's Occupation (if required)

4.

Antero Group
369 Woody
Porter IN
46324

Contributions:
☒ Direct
☐ In-Kind (describe)
Other Receipts:
☐ Interest ☐ Loan
☐ Miscellaneous (specify)

100.-

9-25
CK4314

TREASURER
RICH Q

Contributor's Occupation (if required)

5.

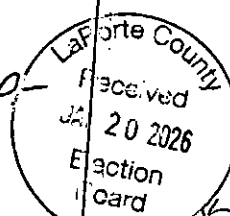
Contributor's Occupation (if required)

SUBTOTAL THIS PAGE OF SCHEDULE A

TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY
(Enter total on ITEM 15a of the Summary Sheet.)

\$ 1450.-

\$





REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE

State Form 4606 (R17 / 8-23)
Indiana Election Division (IC 3-9-5-14)

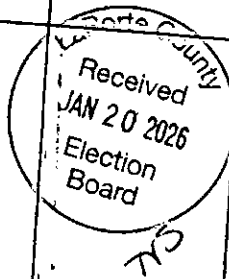
(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts

FILE NUMBER

Page 5 of 6

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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 Gramarosa 8444 N 500 E Rolling Pt. IN 46371 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	5/50 410.- PAID 570.- ROLL 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) 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.-		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		\$ 2800.-		
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)

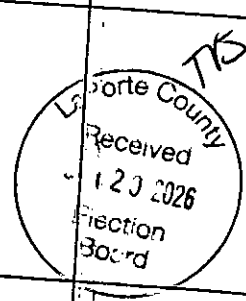
**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS**
Itemized Contributions and Other Receipts

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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 SHAFER 8835 N COUNTY ROAD 1050 E BROWNSBURG IN 46112 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	100.-		9-3-25 OK 1008 TREASURER Rich Q
2. D.L.Z 316 TECH DRIVE BURNS HARBOR IN 46704 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	425-		9-19-25 OK 6123 Rich Q
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.-		





**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 BORAH SKATE 220 POLARON DR MICHIGAN CITY, IN	Contributions: ☒ Direct ☐ In-Kind (describe) <u>OK 2020</u> Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) <u>GOLF CARTING</u>	500.-		9-19-25 RR
2. HERITAGE BUILDS PAR P.O. BOX 66123 INDY IN, 46268	Contributions: ☒ Direct ☐ In-Kind (describe) <u>OK 10/18</u> Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	350.-		9-19-25 RR
3. DPRQ POLITICAL ACTION COMMITTEE 9005 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.-		



**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 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 (month day year) RECEIVED BY
1. REGIONAL COUNCIL OF Carpenters INDIANA CODE 771 GREENWOOD SPRINGS DRIVE GREENWOOD IN 46143	Contributions: ☒ Direct ☐ In-Kind (describe) <u>OK 3161</u> Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	525.-		9-19-25
2.	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)			P.R.
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
Nov 10 2025
Election
Board
TNS



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

(CFA-11)

State Form 48492 (R8 / 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.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-11
REPORT

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 REPUBLICAN
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 OF CONTRIBUTION
(OTHER RECEIPT)

COLUMN A
AMOUNT OF
CONTRIBUTION

DATE RECEIVED
RECEIVED BY

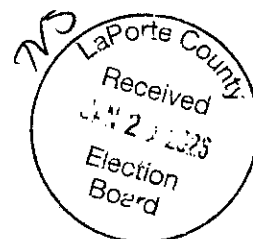
Classification	CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION (OTHER RECEIPT)	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED RECEIVED BY
1. INDV	MARTY S LAKE SOSAN AL ABRAS 13950 OSBORNE RD WAKARUSA, IN 46573	Contributions: ☒ Direct ☐ In-Kind (describe) CK 367D Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) ON CFA 4 ALSO	1000.-	9-15-25 TREASURE R.Q.
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
3.		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 Michael Hamm	Title Treasurer	Date (mm/dd/yy) JAN 15, 26
Signature of Candidate (if applicable)		Date (mm/dd/yy)

FOR OFFICE USE ONLY



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)



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 MAILING 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	DATE DEBT INCURRED (mm dd yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
Richard Gramgross 844 N DOE Zelling Pt IN 46371		CAREY OVER 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:					
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 7 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 Foods 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 STRD 4 WALKERTON IN	RENTAL OF GOLFHOUSE	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	2300.-		9-20-25
Code _____ Committee to Elect Simmy Pressoi	DONATIONS	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	100.-		11-20-25
Code _____ LAMAR SIGNS 454 NORTH EAST FORT WAYNE	Billboards	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other <u>OK 103</u> Purpose:	3675.-		12-10-25
Code _____ WDOE-FM 1700 LINCOLN WAY LAPORTE IN 46350	AD	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other <u>OK 105</u> 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:	120.72		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			695.11		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$		

Laporte County
Received
120.72
Election

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

FILE NUMBER

Page 2 of 2

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.

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

Reprographic Arts
2824 E MICHIGAN BLVD
TRAIL CREEK, IN
46360

T-SHIRTS

☒ Direct ☐ In-Kind
☐ Payment of Debt
☐ Returned Contribution
☐ Other OK 161
Purpose:

538.85

7-7-25

Code

VISITORS BUREAU
FRANKLIN ST
MICHIGAN CITY IN
46360

HOLD SPONSOR

☒ Direct ☐ In-Kind
☐ Payment of Debt
☐ Returned Contribution
☐ Other OK 104
Purpose:

100 -

12-3-25

Code

WALMART
5780 FRANKLIN
MICHIGAN CITY IN

ROLL DOTTING

☒ Direct ☐ In-Kind
☐ Payment of Debt
☐ Returned Contribution
☐ Other OK 102
Purpose:

205.83

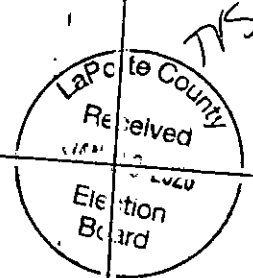
9-4-25

Code

Code

Code

Code



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.)

\$844.68

\$7,195.79