



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

State Form 4606 (R15 / 5-19)  
Indiana Election Division (IC 3-9-5-14)

**(CFA-4)**

**Summary Sheet**

**FILE NUMBER**

**410-75-104**

**TOTAL PAGES IN ENTIRE CFA-4 REPORT**

**INSTRUCTIONS:** Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

**IS THIS AN AMENDMENT?**  Yes  No

**COMMITTEE INFORMATION**

1. Full Name of Committee (as on Statement of Organization) <i>Meg Collins for Long Beach Town Clerk Treasurer Committee</i>	<input type="checkbox"/> Check if this is a new name.
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number <i>(708) 712-7210</i>
4. Mailing Address (Address where all campaign finance correspondence is received.) <i>2400 Florinard Drive</i>	<input type="checkbox"/> Check if this is a new address.
5. City, State, ZIP Code <i>Long Beach, IN 46360</i>	6. Party Affiliation (if applicable) <i>Independent</i>
<b>CANDIDATE INFORMATION (For Candidate's Committees Only)</b>	
7. Full Name of Candidate (Include any nickname.) <i>Meg Collins</i>	8. Party Affiliation or if Independent Candidate <i>Independent</i>
9. Office Sought (Include district number, if any. Not required for exploratory committees.) <i>Town of Long Beach Clerk Treasurer</i>	10. County of Residence <i>Laporte</i>

**TYPE OF REPORT**

**CONVENTION CANDIDATES ONLY**

11. Check one:  
 Pre-Primary  Pre-Election  Annual  Nomination  Other \_\_\_\_\_  
 Final / Disbands Committee (Lines 18, 19, and 20 must be '0')  Outgoing Treasurer (With ten (10) days amend Statement of Organization)

**Check one:**

Pre-Convention  
 Post-Convention

12. Reporting Period (mm/dd/yy):  
From: *1/1/25* Through: *12/31/25*

**COLUMN A**  
This Period

**COLUMN B**  
Year to Date

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

*0*

*0*

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

*0*

**CONTRIBUTIONS AND RECEIPTS**

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

15a. Itemized (Use Schedule A.)	<i>0</i>	<i>0</i>
15b. Unitemized	<i>0</i>	<i>0</i>
15c. Add lines 15a and 15b in both columns.	<b>SUBTOTAL</b> <i>0</i>	<b>SUBTOTAL</b> <i>0</i>
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	<b>TOTAL</b> <i>0</i>	<b>TOTAL</b> <i>0</i>
<b>EXPENDITURES</b>		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	<i>0</i>	<i>0</i>
17b. Unitemized	<i>0</i>	<i>0</i>
17c. Add lines 17a and 17b in both columns.	<b>SUBTOTAL</b> <i>0</i>	<b>SUBTOTAL</b> <i>0</i>
18. Cash on hand and Investments at close of this reporting period (Subtract 17c from 16 in both columns.)	<b>TOTAL</b> <i>0</i>	<i>0</i>
19. Debts OWED BY the committee (Use Schedule D.)	<i>0</i>	<i>0</i>
20. Debts OWED TO the committee (Use Schedule E.)	<i>0</i>	<i>0</i>

**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  
*Mart L*

Title  
*Clerk Treasurer*

Date (mm/dd/yy)  
*1/20/26*

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, IC 3-9-4-18)

**FOR OFFICE USE ONLY**

*TVS 8-4-17 am*  
Laporte County  
Received  
JAN 21 2026  
Election Board