

**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.**

										FILE NUMBER	
1. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes, please enter the file number in this box.</i> →										46-26-07	
<b>SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.</b>											
2. Last Name <b>DiMartino</b>		First Name <b>Guy</b>		Middle Name <b>Scott</b>		Nickname		3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee			
4. Mailing Address (number and street, city, state, and ZIP code) <b>0676 N. Shebel Rd.</b>						5. FAX (Optional)		6. E-mail Address (Optional)			
7. City <b>Michigan City</b>		State <b>IN</b>	ZIP Code <b>46360</b>	8. County <b>LaPorte</b>		9. Telephone (Day) <b>219 871-1234</b>		10. Telephone (Evening) <b>352 267-9168</b>			
11. Party Affiliation <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Other						12. Office Sought (include district number, if any. Not required for an exploratory committee.) <b>LAPORTE</b>					
<b>SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.</b>											
13. Full Name of Committee (Do not abbreviate.) <input type="checkbox"/> Check if this is a new name. <b>Committee to Elect DiMartino</b>											
14. Mailing Address (number and street, city, state, and ZIP code) <input checked="" type="checkbox"/> Check if this is a new address. <b>336 W. 806 N.</b>						15. FAX (Optional) <b>866 8873026</b>		16. E-mail Address (Optional) <b>melanie@dimartino4judge.com</b>			
17. City <b>Valparaiso</b>		State <b>IN</b>	ZIP Code <b>46385</b>	18. County <b>Porter</b>		19. Telephone <b>219 8711234</b>		20. Committee Organization Date (mm/dd/yy) <b>12.08.2025</b>			
21. Chairperson's Full Name <input type="checkbox"/> Designate Candidate as Chairperson. <input type="checkbox"/> Check if this is a new chairperson. <b>Melanie J. McInerney</b>											
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. <b>336 W. 806 N.</b>						23. FAX (Optional)		24. E-mail Address (Optional)			
25. City <b>Valparaiso</b>		State <b>IN</b>	ZIP Code <b>46385</b>	26. County <b>Porter</b>		27. Telephone (Day) <b>219 8711234</b>		28. Telephone (Evening) <b>(219) 344-7915</b>			
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.) <b>Horizon Bank</b>											
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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
<b>SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)</b>											
32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee. <b>Joan M. DiMartino</b>						Person Appointed Treasurer <b>Joan M. DiMartino</b>					
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input type="checkbox"/> Check if this is a new treasurer. <b>Joan M. DiMartino</b>						Signature of the Committee Chairperson <i>Melanie J. McInerney</i>					
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. <b>336 W. 806 N.</b>						35. FAX (Optional)		36. E-mail Address (Optional)			
37. City <b>Valparaiso</b>		State <b>IN</b>	ZIP Code <b>46385</b>	38. County <b>Porter</b>		39. Telephone (Day) <b>352 267-9177</b>		40. Telephone (Evening) <b>(352) 267-9177</b>			
<b>SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)</b>											
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 <b>Joan M. DiMartino</b>					
<b>SECTION E. CERTIFICATION OF STATEMENT</b>											
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 <b>Melanie J. McInerney</b>		Signature of Chairperson <i>Melanie J. McInerney</i>				Date (mm/dd/yy) <b>1/12/26</b>		FOR OFFICE USE ONLY  712 Laporte County Received JAN 12 2026 Election Board			
43. Typed or Printed Name of Candidate <b>Guy S DiMartino</b>		Signature of Candidate <i>Guy S DiMartino</i>				Date (mm/dd/yy) <b>1-12-2026</b>					
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).											

## eSignature Details

---

Signer ID: 6AWkcThSmjsFceNhaU9P7snE  
Signed by: Joan M. DiMartino  
Sent to email: joandimartino@comcast.net  
IP Address: 71.52.26.202  
Signed at: Jan 12 2026, 11:39 am EST



**REPORT OF RECEIPTS AND EXPENDITURES  
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.

**FILE NUMBER**  
46-26-07

**TOTAL PAGES IN ENTIRE CFA-4 REPORT**  
24

**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 DiMartino

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number  
(219) 871-1234

4. Mailing Address (Address where all campaign finance correspondence is received.)  Check if this is a new address.  
336 W. 806 N.

5. City, State, ZIP Code  
Valparaiso, IN 46385

6. Party Affiliation (if applicable)

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

7. Full Name of Candidate (Include any nickname.)  
Guy S. DiMartino

8. Party Affiliation or If Independent Candidate  
Republican

9. Office Sought (Include district number, if any. Not required for exploratory committee.)  
LaPorte Superior Court 3

10. County of Residence  
LaPorte

**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 (Within ten (10) days amend Statement of Organization.)

Check one:  
 Pre-Convention  
 Post-Convention

12. Reporting Period (mm/dd/yy): From: 01/01/2026 Through: 04/10/2026	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	\$17,000.00	
14. Cash on hand and investments January 1, current year.		\$17,000.00

**CONTRIBUTIONS AND RECEIPTS**

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

15a. Itemized (Use Schedule A.)	\$24,990.00	\$24,990.00
15b. Unitemized		
15c. Add lines 15a and 15b in both columns. <b>SUBTOTAL</b>	\$24,990.00	\$24,990.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. <b>TOTAL</b>	\$41,990.00	\$41,990.00

**EXPENDITURES**

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	\$34,137.58	\$34,137.58
17b. Unitemized		
17c. Add lines 17a and 17b in both columns. <b>SUBTOTAL</b>	\$34,137.58	\$34,137.58
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) <b>TOTAL</b>	\$7,852.42	\$7,852.42
19. Debts OWED BY the committee (Use Schedule D.)		
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: Jean M. DiMartino Title: Treasurer Date (mm/dd/yy): 4/16/2026

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**

Laporte County  
Received  
APR 17 2026  
Election Board  
7:58am



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

State Form 4606 (R18/6-25)  
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  
STM 46-25-65 A WA B T C I

Page 1 of 12

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i> RECEIVED BY
1. Matthew Lawson 1342 Corning Dr. Crown Point, IN 46307  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$250.00		01/08/2026  Anedot/ Credit Card MJM
2. Leslie Pejic 4630 St. Charles Ave New Orleans, LA 70115  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$100.00		01/16/2026  Anedot/ Credit Card MJM
3. Mollie Wentworth PO Box 571 Waynesville, OH 45068  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$100.00		01/16/2026  Anedot/ Credit Card MJM
4. Anthony Novak 9 Bristol Drive Michigan City, IN 46360  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$75.00		01/27/2026  Anedot/ Credit Card MJM
5. William Krone 2707 Floral Trl. Long Beach, IN 46360  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$100.00		01/27/2026  Anedot/ Credit Card MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 625.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		<b>\$</b>		



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**  
State Form 4606 (R18 / 6-25)  
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.

<b>FILE NUMBER</b>	
46-25-65	
Page <u>2</u>	of <u>12</u>

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm dd yy)</i> RECEIVED BY
1.  Debra Krone 8650 SE 132nd St Summerfield, FL 34491  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$100.00		01/27/2026  Anedot/ Credit Card MJM
2.  Nicholas Otis 6 Greenacres LaPorte, IN 46350  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$75.00		01/27/2026  Anedot/ Credit Card MJM
3.  Karrie Schwartz 1245 MacArthur Blvd. Munster, IN 46321  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$500.00		01/29/2026  Anedot/ credit card MJM
4.  Jessica Sebag Staker 2159 SE Ocean Blvd Stuart, FL 34996  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$100.00		01/31/2026  Anedot/ Credit Card MJM
5.  Michael McCready 10008 S. Western Ave Chicago, IL 60643  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$450.00		02/02/2026  Anedot/ Credit Card MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 1,225.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		<b>\$</b>		



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**  
State Form 4606 (R18/6-25)  
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**  
46-25-65  
Page 3 of 12

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. David Jones 13143 Dover Hill Rd Loogootee, IN 47553  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$75.00		02/03/2026 Anedot/ Credit Card MJM
2. Barry McDonnell 601 Franklin Street Suite 200 Michigan City, IN 46360  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$75.00		02/04/2026 Anedot/ Credit Card MJM
3. Jordan Wagner 54 S. Sewalls Point Rd. Stuart, FL 34996  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$500.00		02/05/2026 Anedot / Credit Card MJM
4. Duke Escue 980 Birch Dr Crown Point, IN 46307  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$250.00		02/05/2026 Anedot/ Credit Card MJM
5. Daniel Cha, MD 4711 Golf Rd Suite 1075 Skokie, IL 60076  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$25.00		02/08/2026 Anedot/ Credit Card MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 925.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> (Enter total on ITEM 15a of the Summary Sheet.)		<b>\$ 1,100.00</b>		



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

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

**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

46-25-65

Page 4 of 12

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. Francis Schafer Lauren Schafer-Branigin 3820 E. US 30 Merrillville, IN 46410 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$200.00		02/05/2026 Mail MJM
2. Pearl DiMartino 4542 Hidden Harbor Dr. Leesburg, FL 34748 Contributor's Occupation (if required) Retired	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$1,000.00		03/02/2026 Check JMD
3. James O'Brien 15822 Cedar Ridge Ct Granger, IN 46530 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$250.00		02/09/2026 Mail MJM
4. John Link 112 Martin Dr. Trail Creek, IN 46360 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$250.00		02/27/2026 Hand Del. MJM
5. Jim & Donna LaMontagna 690 Verdano Ter Crown Point, IN 46307 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$500.00		02/11/2026 Hand Del MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$12,200.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> (Enter total on ITEM 15a of the Summary Sheet.)		<b>\$12,200.00</b>		



REPORT OF RECEIPTS AND EXPENDITURES

OF A POLITICAL COMMITTEE

State Form 4606 (R18 / 6-25)

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

EXPENDITURES

(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: 46-25-65 Page 12

Table with 5 columns: CONTRIBUTOR'S FULL NAME AND OCCUPATION, TYPE OF CONTRIBUTION OR OTHER RECEIPT, COLUMN A AMOUNT THIS PERIOD, COLUMN B CUMULATIVE YEAR-TO-DATE, DATE RECEIVED. Rows include Lucille Lopez (\$100.00), Julian Watson (\$200.00), Ted Pfauth (\$100.00), Andrew Jones (\$1,000.00), Timothy Stabosz (\$100.00). Subtotal: \$1,500.00.



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

State Form 4606 (R18 / 6-25)

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

46-25-65

Page 6 of 12

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm, dd, yy)</i> RECEIVED BY
<p>1. Robert Dignam 10156 Privet Dr. Crown Point, IN 46307</p> <p>Contributor's Occupation <i>(if required)</i> _____</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____</p>	\$150.00		<p>02/23/26</p> <p>Check MJM</p>
<p>2. Kathleen &amp; David Hinshaw 4155 Oakmont Ct Crown Point, IN 46307</p> <p>Contributor's Occupation <i>(if required)</i> _____</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____</p>	\$200.00		<p>02/23/26</p> <p>Check MJM</p>
<p>3. John &amp; Julie Wojcik 109 Beverly Ct Michigan City, IN 46360</p> <p>Contributor's Occupation <i>(if required)</i> _____</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____</p>	\$300.00		<p>02/23/26</p> <p>Check MJM</p>
<p>4. Heather Melton &amp; Ron Heeg 5161 N. Cameron LaPorte, IN 46350</p> <p>Contributor's Occupation <i>(if required)</i> _____</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____</p>	\$75.00		<p>02/23/26</p> <p>Check MJM</p>
<p>5. Scott &amp; Michelle Cooley 1267 S. 400 W. LaPorte, IN 46350</p> <p>Contributor's Occupation <i>(if required)</i> <u>Carpenter</u></p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____</p>	\$1,000.00		<p>02/23/26</p> <p>Check MJM</p>
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 1,725.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		<b>\$</b>		



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

State Form 4606 (R18 / 6-25)

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

**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**

46-25-65

Page 7 of 12

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i> RECEIVED BY
1. Andrew Skwiat & Marlee Doms 1655 N. Shebel Rd Michigan City, IN 46360  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$1,000.00		02/23/26 Check MJM
2. ANONYMOUS  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$100.00		02/23/26 Cash MJM
3. ANONYMOUS  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$80.00		02/23/26 Cash MJM
4. Mr. & Mrs Cliff Matthews 5431 N. Lindsay LaPorte, IN 46350  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$200.00		02/23/26 Cash MJM
5. Barb Huston 1570 Roberts St LaPorte, IN 46350  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$100.00		02/23/26 Cash MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 1,480.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>				



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

State Form 4606 (R18 / 6-25)  
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	
46-25-65	
Page <u>8</u>	of <u>12</u>

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm dd yy)</i> RECEIVED BY
1.  Anthony Ashford 336 W. 806 N Valparaiso, IN 46385  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$100.00		02/23/26  Cash MJM
2.  Bob Devetski 12 Longmeadow Village Dr. Niles, MI 49120  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$75.00		02/23/26  Cash MJM
3.  Bethany Beckman 1411 Woodland Michigan City, IN 46360  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$100.00		02/23/26  Cash MJM
4.  Tracey Stalbrink 3202 S. 1050 W. Westville, IN 46391  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$60.00		02/23/26  Cash MJM
5.  Allen Stevens 6821 W. Voelk Rd Wanatah, IN 46390  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$100.00		02/23/26  Cash MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 435.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		<b>\$</b>		



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

State Form 4606 (R18 / 6-25)

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

EXPENDITURES

**(CFA 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	
46-25-65	
Page 9	of 12

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED
				<i>(mm/dd/yy)</i> RECEIVED BY
1. Regina Wilkinson 14230 Evergreen Dr New Buffalo, MI 49117  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$75.00		02/13/26 Anedot/CC MJM
2. Andrew Olson 320 Fountain Oaks Lane Atlanta, GA 30342  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$150.00		02/17/26 Anedot/CC MJM
3. Sean Fagan P.O. Box 326 Wanatah, IN 46390  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$250.00		02/18/26 Anedot/CC MJM
4. Bob Montgomery 161 N. Clark St 2550 Chicago, IL 60601  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$150.00		02/19/2026 Anedot/CC MJM
5. Raymond Maloney 206 Moore Rd Michigan City, IN 46360  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$100.00		02/19/2026 Anedot/CC MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 725.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		<b>\$ 11,100.00</b>		



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

State Form 4606 (R18 / 6-25)  
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.

<b>FILE NUMBER</b>	
46-25-65	
Page <u>10</u>	of <u>12</u>

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>mm dd yy</i> RECEIVED BY
1. Brian Dickover 4450 Curran Rd Buchanan, MI 49107  <i>Contributor's Occupation (if required)</i> _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$75.00		02/19/26  Anedot/CC MJM
2. Brandon Kroft 1064 Mission Hills Court Chesterton, IN 46304  <i>Contributor's Occupation (if required)</i> _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$500.00		02/19/26  Anedot/CC MJM
3. Ulana Sonevytsky 233 Barberrry Lane Valparaiso, IN 46383  <i>Contributor's Occupation (if required)</i> _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$100.00		02/19/26  Anedot/CC MJM
4. James Metcalf 1721 E. Porter Ave Chesterton, IN 46304  <i>Contributor's Occupation (if required)</i> _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$1,000.00		02/24/26  Anedot/CC MJM
5. Kelly Smith 10258 S 1150 W Wanatah, IN 46390  <i>Contributor's Occupation (if required)</i> <u>Owner - Vita King</u>	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$2,500.00		02/28/26  Anedot/CC MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 4,175.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		<b>\$</b>		



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

State Form 4606 (R18/6-25)

RECEIPTS (CFA-4 SCHEDULE A-1)

**CONTRIBUTIONS BY INDIVIDUALS  
Itemized Contributions and Other Receipts**

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

**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**  
46-25-65  
Page 11 of 12

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i>
				RECEIVED BY
1. David Hodges 8738 E. 50 N. Mill Creek, IN 46365  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$50.00		03/04/2026 Anedot/CC MJM
2. Bruce Edenson 913 Wabash Apt. 4 Michigan City, IN 46360  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$50.00		03/18/2026 Anedot/CC MJM
3. Alex Passo 15 Deer Trail Portage, IN 46368  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$250.00		03/23/26 Anedot/CC MJM
4. Russell Brown 2080 N. Main St. Crown Point, IN 46307  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$500.00		03/27/26 Anedot/CC MJM
5. Jody Slabaugh 2402 N State Rd. 39 LaPorte, IN 36350  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$100.00		03/09/26 Check MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$1,950.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		<b>\$1,950.00</b>		



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

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

**(CFA-4 SCHEDULE A-2)  
CONTRIBUTIONS BY CORPORATIONS  
Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS 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 corporations 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	
46-25-65	
Page 12	of 12

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i> RECEIVED BY
1. Friends of Connie Gramarossa 335 Lake Hills Road Michigan City, IN 46360	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$100.00		02/23/26  Check MJM
2.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>			
3.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>			
4.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>			
5.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>			
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 100.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		<b>\$ 16,065.00</b>		

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS 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 corporations **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*).

<b>FILE NUMBER</b>
46-25-65
Page <u>1</u> of <u>4</u>

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i> RECEIVED BY
1. Yahne Law 3 Lincolnway, Suite 201 Valparaiso, IN 46383	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$300.00		02/23/2026 Check - Mail MJM
2. Dave's Garage, Inc. 7625 W. US Hwy 20 Michigan City, IN 46360	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$150.00		02/23/26 Check MJM
3. Rocky's Body Shop LLC 3611 W. US Hwy 12 Michigan City, IN 46360	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$500.00		02/23/26 Check MJM
4. Levinson & Levinson 384 W. 80th Pl. Merrillville, IN 46410	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$75.00		02/23/26 Check MJM
5. Calumet River Construction, Inc 560 Ingraham Ave Calumet City, IL 60409	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$75.00		02/23/26 Check MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 1,100.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		<b>\$</b>		



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

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

**CONTRIBUTIONS BY CORPORATIONS  
Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS 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 corporations 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**  
46-25-65  
Page 2 of 4

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. Sworden Law, PC 337 W. 806 N Valparaiso, IN 46385	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$1,000.00		02/23/26 Check MJM
2. The Region Public Adjusters 915 Ridge St. Suite 3336 Muster, IN 46321	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$75.00		02/23/26 Check MJM
3. Payne Tool & Engineering 7407 W. State Rd. 2 LaPorte, IN 46350	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$500.00		02/23/26 Check MJM
4. Schafer & Schafer 3820 East U.S. 30 Merrillville, IN 46410	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$500.00		02/05/26 Check MJM
5. Maple City Coffee LLC 4125 Springcreek Tr. LaPorte, IN 46350	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$200.00		02/23/26 Check MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$2,275.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY.</b> (Enter total on ITEM 15a of the Summary Sheet.)				

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

State Form 4606 (R18 / 6-25)

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

**(CFA-4 SCHEDULE A-2)  
CONTRIBUTIONS BY CORPORATIONS  
Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS 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 corporations **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*).

<b>FILE NUMBER</b>	
46-25-65	
Page <u>3</u>	of <u>4</u>

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i> RECEIVED BY
1.  Law Office of Ben Murphy, LLC 426 N. Broad St Griffith, IN 46319	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$500.00		02/23/26  Check MJM
2.  MCR Partners 5920 Hohman Ave Hammond, IN 46320	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$100.00		02/23/26  Check MJM
3.  St. Mary of the Angels 811 Monroe St. LaPorte, IN 46350	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$1,000.00		04/06/26  Check MJM
4.  Tavern On Twelve 3103 US-12 Michigan City, IN 46360	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <i>(describe)</i> Fundraiser hosting  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$1,300.00		2/19/26  In-Kind: Labor/Food/ drink/facility
5.  Calhoun Law 123 N. Main St. Crown Point, IN 46307	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i>	\$500.00		02/24/26  Check MJM
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 3,400.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		<b>\$</b>		

REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

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

REPORT OF RECEIPTS AND EXPENDITURES  
(CFA-4 SCHEDULE A-2)  
CONTRIBUTIONS BY CORPORATIONS  
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS 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 corporations 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

46-25-65

Page 4 of 4

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. The Center for Facial Plastic & Cosmetic Surgery, PC 8865 W. 400 N. Michigan City, IN 46360	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$150.00		02/09/26 Check LSP
2. US Public Adjusters Corp 7818 Knottingham Ln Downers Grove, IL 60516	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$1,000.00		03/06/26 Check MJM
3. Ashford Law Group 336 W. 806 N. Valparaiso, IN 46385	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$1,000.00		03/16/26 Check MJM
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)			
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 2,150.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$ 8,925.00		



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

State Form 4606 (R18 / 6-25)  
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

46-25-65

Page 17 of 7

RECIPIENT'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	RECIPIENT'S OCCUPATION <i>OFFICE SOUGHT (if applicable)</i>	TYPE OF EXPENDITURE and PURPOSE <i>(be specific)</i>	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE <i>(mm/dd/yy)</i>
Code <u>A</u> Google LLC 1600 Ampitheatre Way Mountain View, CA 94043	Website Host	<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: Campaign site host	\$10.21		1/1/26
Code <u>A</u> Vista Print 95 Hayden Ave. Lexington, MA 02421	Online Printer service	<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 Rack cards	\$131.60		1/4/26
Code <u>A</u> Lamar Advertising 1335 E. Mishawaka Ave. South Bend, IN 46615	Billboard company	<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: Billboards	\$7,800.00		1/6/26
Code <u>A</u> McMaddwrappers 2312 Franklin Michigan City, IN 46360	Car Decal Business	<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: Car wraps	\$1,650.00		1/12/26
Code <u>A</u> Vista Print 95 Hayden Ave. Lexington, MA 02421	Online printer service	<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: Fundraiser invite design	\$10.00	\$141.60	1/16/26
Code <u>O</u> Anedot 3723 Greenville Ave Ste. 41002 Dallas, TX 75206-5311	Online donation collection	<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: Online donation Processing Fee	\$8.60		1/19/26
Code <u>A</u> Vista Print 95 Hayden Ave. Lexington, MA 02421	Online printer service	<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: Fundraiser invites	\$248.21	\$389.81	1/18/26
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>			\$9,858.62		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 17a of the Summary Sheet.)</i>					



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

State Form 4606 (R18 / 6-25)  
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

46-25-65

Page 2 of 7

RECIPIENT'S NAME AND MAILING ADDRESS <i>(street, number, city, state ZIP code)</i>	RECIPIENT'S OCCUPATION <i>OFFICE SOUGHT (if applicable)</i>	TYPE OF EXPENDITURE and PURPOSE <i>(be specific)</i>	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE <i>(mm/dd/yy)</i>
Code <u>O</u> Anedot 3723 Greenville Ave Ste. 41002 Dallas, TX 75206-5311	Online donation collection	<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: Online donation processing fee	\$39.80	\$48.40	2/2/26
Code <u>O</u> Anedot 3723 Greenville Ave Ste. 41002 Dallas, TX 75206-5311	Online donation collection	<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: Online donation processing fee	\$56.80	\$105.20	2/9/26
Code <u>O</u> BAC Marketing 717 Franklin Ste. 506 Michigan City, IN 46360	Web Designer	<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: Campaign website design	\$1,250.00		2/6/26
Code <u>O</u> Anedot 3723 Greenville Ave Ste. 41002 Dallas, TX 75206-5311	Online Donation Collection	<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: Online donation processing fee	\$3.30	\$108.50	2/16/26
Code <u>O</u> Anedot 3723 Greenville Ave Ste. 41002 Dallas, TX 75206-5311	Online Donation collection	<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: Online donation processing fee	\$55.10	\$163.60	2/23/26
Code <u>A</u> Parkman Advertising P.O. Box 226 Westville, IN 46391	Advertising company	<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: Billboard	\$1,400.00		2/24/26
Code <u>F</u> Tavern on Twelve 3103 US-12 Michigan City, IN 46360	Restaurant	<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: Fundraiser host	\$1,300.00		2/19/26
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>			\$ 4,105.00		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 17a of the Summary Sheet.)</i>			\$ -		



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

State Form 4606 (R18 / 6-25)  
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 [circled 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**  
46-25-65  
Page 3 of 7

RECIPIENT'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	RECIPIENT'S OCCUPATION <i>OFFICE SOUGHT (if applicable)</i>	TYPE OF EXPENDITURE and PURPOSE <i>(be specific)</i>	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE <i>(mm/dd/yy)</i>
Code <u>A</u> Reprographic Arts, 2824 E. Michigan Blvd. Michigan City, IN 46360	Print company	<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: yard signs	\$2,129.30		2/24/26
Code <u>A</u> Gerard Media 685 E 1675 N Michigan City, IN 46360	Radio Station	<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: Radio ads	\$2,820.00		2/26/26
Code <u>A</u> Amazon P.O. Box 81226 Seattle, WA 98108-1226	Online retailer	<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: lip balms	\$181.88		2/26/26
Code <u>A</u> Avery 50 Pointe Dr. Brea, CA 92821	Online Label company	<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: lip balm labels	\$137.15		2/26/26
Code <u>C</u> Race the Region 3400 Calumet Ave. Valparaiso, IN 46383	Race organizer	<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: Lucky Charm 5k registration - Marquette High School Fundraiser	\$90.00		3/5/26
Code <u>C</u> Race the Region 3400 Calumet Ave. Valparaiso, IN 46383	Race Organizer	<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: Lucky Charm 5k registration - Marquette High School Fundraiser	\$180	\$270.00	3/5/26
Code <u>C</u> Race the Region 3400 Calumet Ave. Valparaiso, IN 46383	Race Organizer	<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: Lucky Charm 5k registration - Marquette High School Fundraiser	\$29.00	\$299.00	3/6/26
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>			\$5,567.33		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 17a of the Summary Sheet.)</i>			\$		



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

State Form 4606 (R18 / 6-25)  
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

46-25-65

Page 4 of 7

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>C</u> Race the Region 3400 Calumet Ave. Valparaiso, IN 46383	Race Organizer	<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: Lucky Charm 5k registration - Marquette High School Fundraiser	\$58.00	\$357.00	3/19/26
Code <u>A</u> Anedot 3723 Greenville Ave Ste. 41002 Dallas, TX 75206-5311	Online donation collection	<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: Online donation processing fee	\$140.60	\$304.20	3/2/26
Code <u>A</u> Vista Print 95 Hayden Ave. Lexington, MA 02421	Online print service	<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: 5,000 rack cards	\$714.76	\$1,104.57	3/8/26
Code <u>A</u> Reprographic Arts 2824 E. Michigan Blvd. Michigan City, IN 46360	Print Company	<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: Shirts	\$195.11	\$2,324.41	3/5/26
Code <u>A</u> Anedot 3723 Greenville Ave Ste. 41002 Dallas, TX 75206-5311	Online donation collection	<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: online donation processing fee	\$2.30	\$306.50	3/9/26
Code <u>A</u> Anedot 3723 Greenville Ave Ste. 41002 Dallas, TX 75206-5311	Online Donation collector	<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: online donation processing fee	30.60	\$337.10	3/30/26
Code <u>A</u> Dollar Tree 4209 Franklin Michigan City, IN 46360	Store	<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: Parade giveaways	\$38.61		3/13/26
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>			\$ 1,179.98		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> (Enter total on ITEM 17a of the Summary Sheet.)			\$		



REPORT OF RECEIPTS AND EXPENDITURES

OF A POLITICAL COMMITTEE

State Form 4606 (R18 / 6-25)
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

46-25-65

Page 5 of 7

Table with 6 columns: RECIPIENT'S NAME AND MAILING ADDRESS, RECIPIENT'S OCCUPATION, TYPE OF EXPENDITURE and PURPOSE, COLUMN A AMOUNT THIS PERIOD, COLUMN B CUMULATIVE YEAR-TO-DATE, DATE OF EXPENDITURE. Rows include Hobby Lobby, USPS, WEFM, Amazon, Reprographic Arts, Maple City Roasters, and Spoon River Media. Includes a subtotal row and a total row for all pages.



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

State Form 4606 (R18 / 6-25)  
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

46-25-65

Page 6 of 7

RECIPIENT'S NAME AND MAILING ADDRESS <i>(street, number, city state, ZIP code)</i>	RECIPIENT'S OCCUPATION <i>OFFICE SOUGHT (if applicable)</i>	TYPE OF EXPENDITURE and PURPOSE <i>(be specific)</i>	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE <i>(mm dd'yy)</i>
Code <u>O</u> USPS 303 Washington Michigan City, IN 46360	Post Office	<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: Postage	\$1,284.60	\$2,064.60	04/01/26
Code <u>A</u> Kiel Media PO Box 53 LaCrosse, IN	Newspaper	<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: Print ads	\$600.00		04/02/26
Code <u>A</u> Duneland Media 1305 Pine Lake Ave LaPorte, IN 46350	Media Ad Company	<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: YouTube ads	\$2,500.00		4/6/26
Code <u>A</u> Gerard Media 685 E. 1675 N Michigan City, IN 46360	Radio Station	<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: Social Media ads	\$650.00	\$3,470.00	4/6/26
Code <u>O</u> USPS 303 Washington Michigan City, IN 46360	Post Office	<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: Postage	\$36.60	\$2,101.20	02/02/26
Code <u>A</u> Google LLC 1600 Ampitheatre Pkwy Mountain View, CA 94043	Website Host	<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: Website hosting	\$21.44	\$31.65	2/1/26
Code <u>A</u> Google LLC 1600 Ampitheatre Pkwy Mountain View, CA 94043	Website Host	<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: website hosting	\$16.80	\$48.45	3/1/26
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>			\$ 5,109.44		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 17a of the Summary Sheet.)</i>			\$		



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

State Form 4606 (R18 / 6-25)  
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**

46-25-65

Page 7 of 7

RECIPIENT'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	RECIPIENT'S OCCUPATION <i>OFFICE SOUGHT (if applicable)</i>	TYPE OF EXPENDITURE and PURPOSE <i>(be specific)</i>	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE <i>(mm/dd/yy)</i>
Code <u>A</u> Google LLC 1600 Amphitheatre Pkwy Mountain View, CA 94043	Website host	<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: Website hosting	\$16.80	\$65.25	04/01/26
Code <u>A</u> All4Promos 20 Research Pkwy Ste A Old Saybrook, CT 06475	Online printers	<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: mail files	\$1,599.65		02/26/26
Code <u>A</u> Horizon Bank 515 Franklin St. Michigan City, IN 46360	Bank	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Returned check fees	\$40.00		02/28/26
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:			
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>			\$ 1,656.45		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 17a of the Summary Sheet.)</i>			\$ 34,137.58		