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

FILE NUMBER: 46-210-59

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*) ☐ Check if this is a new name.
The Committee to Elect Olga

2. Acronym or Abbreviated Name *(if any)*

3. Committee Telephone Number
(219) 380-7442

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

5. City, State, ZIP Code
Westville, IN 46391

6. Party Affiliation *(if applicable)*

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

7. Full Name of Candidate *(Include any nickname.)*
Olga Pothoski

8. Party Affiliation or If Independent Candidate
Democratic

9. Office Sought *(Include district number, if any. **Not required for exploratory committee.**)*
La Porte County Council District 1

10. County of Residence
La Porte

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: 01/01/2026 Through: 4/10/2026	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	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.)*	1751.50	1751.50
15b. Unitemized	755.00	755.00
15c. Add lines 15a and 15b in both columns. **SUBTOTAL**	2506.50	2506.50
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. **TOTAL**	2506.50	2506.50
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(Use Schedule B.) (Public Question: use Schedule C.)*	1551.50	1551.50
17b. Unitemized	0.00	0.00
17c. Add lines 17a and 17b in both columns. **SUBTOTAL**	1551.50	1551.50
18. Cash on hand and investments at close of this reporting period *(Subtract 17c from 16 in both columns.)* **TOTAL**	955.00	955.00
19. Debts OWED BY the committee *(Use Schedule D.)*	$1,551.50	
20. Debts OWED TO the committee *(Use Schedule E.)*	0.00	

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	Title	Date *(mm/dd/yy)*
Signature of Candidate *(if applicable)* Olga Pothoski		Date *(mm/dd/yy)* 04/17/26

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. *(IC 3-9-4-5)* A person who knowingly files a fraudulent report commits a Level 6 felony. *(IC 3-14-1-13)* A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, *(IC 3-14-1-14)* and may be subject to civil penalties. *(IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)*

FOR OFFICE USE ONLY

LaPorte County
Received
APR 17 2026
Election Board
10:28 am TVS

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

Page _____ of _____

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. Olga Pothorski 210 Jefferson Street Westville, IN 46391 Contributor's Occupation *(if required)* _____	Contributions: ☐ Direct ☑ In-Kind *(describe)* _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	1,200.00	1,200.00	3/21/2026 Olga Pothorski
2. Olga Pothorski 210 Jefferson Street Westville, IN 46391 Contributor's Occupation *(if required)* _____	Contributions: ☐ Direct ☑ In-Kind *(describe)* _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	351.50	1551.50	04/02/2026 Olga Pothorski
3. Nicole Messacar 1401 Illinois Ave La Porte IN 46350 Contributor's Occupation *(if required)* _____	Contributions: ☑ Direct ☐ In-Kind *(describe)* _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	200.00	200.00	04/09/2026 Olga Pothorski
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	$1,751.50		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*	$1,751.50		

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
Page _____ of _____

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 _____ Parkman Advertising PO Box 226 Westville, IN 46392	Agribusiness	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	1200.00	1200.00	3/21/2026
☐ Code _____ Boy-Conn Printers, Inc. 803 E Glendale Blvd Valparaiso, IN 46383	Printer	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	351.50	351.50	04/02/2026
☐ Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
☐ Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
☐ Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
☐ Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
☐ Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B			$ 1551.50		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet.)*			$ 1551.50		

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 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 _____ of _____

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 / NATURE OF DEBT	DATE DEBT INCURRED *(mm/dd/yy)*	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Olga Pothorski 210 Jefferson Street Westville, IN 46391 LENDER'S OCCUPATION: Self		1,200.00	3/21/2026	0.00	1200.00
Olga Pothorski 210 Jefferson Street Westville, IN 46391 LENDER'S OCCUPATION: Self		351.50	04/02/2026	0.00	1551.50
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
			SUBTOTAL THIS PAGE OF SCHEDULE D		$ 1551.50
			TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY *(Enter total on ITEM 19 of the Summary Sheet.)*		$ 1551.50

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

FILE NUMBER: 46-26-59

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*) ☐ Check if this is a new name.
The Committee to Elect Olga

2. Acronym or Abbreviated Name *(if any)*

3. Committee Telephone Number
(219) 380-7442

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

5. City, State, ZIP Code
Westville, IN 46391

6. Party Affiliation *(if applicable)*

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

7. Full Name of Candidate *(Include any nickname.)*
Olga Pothoski

8. Party Affiliation or If Independent Candidate
Democratic

9. Office Sought *(Include district number, if any. **Not required for exploratory committee.**)*
La Porte County Council District 1

10. County of Residence
La Porte

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: 01/01/2026 Through: 4/10/2026	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	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.)*	1751.50	1751.50
15b. Unitemized	755.00	755.00
15c. Add lines 15a and 15b in both columns. **SUBTOTAL**	2506.50	2506.50
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. **TOTAL**	2506.50	2506.50
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(Use Schedule B.) (Public Question: use Schedule C.)*	1551.50	1551.50
17b. Unitemized	0.00	0.00
17c. Add lines 17a and 17b in both columns. **SUBTOTAL**	1551.50	1551.50
18. Cash on hand and investments at close of this reporting period *(Subtract 17c from 16 in both columns.)* **TOTAL**	955.00	955.00
19. Debts OWED BY the committee *(Use Schedule D.)*	$1,551.50	
20. Debts OWED TO the committee *(Use Schedule E.)*	0.00	

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	Title	Date *(mm/dd/yy)*
Signature of Candidate *(if applicable)* Olga Pothoski		Date *(mm/dd/yy)* 4-24-26

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. *(IC 3-9-4-5)* A person who knowingly files a fraudulent report commits a Level 6 felony. *(IC 3-14-1-13)* A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, *(IC 3-14-1-14)* and may be subject to civil penalties. *(IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)*

FOR OFFICE USE ONLY

LaPorte County
Received
APR 24 2026
Election Board

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

Page _____ of _____

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. Olga Pothorski 210 Jefferson Street Westville, IN 46391 Contributor's Occupation *(if required)* _____	Contributions: ☐ Direct ☑ In-Kind *(describe)* _____ Other Receipts: ☐ Interest ☒ Loan ☐ Miscellaneous *(specify)* _____	1,200.00	1,200.00	3/21/2026 Olga Pothorski
2. Olga Pothorski 210 Jefferson Street Westville, IN 46391 Contributor's Occupation *(if required)* _____	Contributions: ☐ Direct ☑ In-Kind *(describe)* _____ Other Receipts: ☐ Interest ☒ Loan ☐ Miscellaneous *(specify)* _____	351.50	1551.50	04/02/2026 Olga Pothorski
3. Nicole Messacar 1401 Illinois Ave La Porte IN 46350 Contributor's Occupation *(if required)* _____	Contributions: ☑ Direct ☐ In-Kind *(describe)* _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	200.00	200.00	04/09/2026 Olga Pothorski
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	$ $1,751.50		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*	$ $1,751.50		

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
Page _____ of _____

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 _____ Parkman Advertising PO Box 226 Westville, IN 46392	Agribusiness	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	1200.00	1200.00	3/21/2026
Code _____ Boy-Conn Printers, Inc. 803 E Glendale Blvd Valparaiso, IN 46383	Printer	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	351.50	351.50	04/02/2026
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
		SUBTOTAL THIS PAGE OF SCHEDULE B	$ 1551.50		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet.)*	$ 1551.50		

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 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 _____ of _____

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 / NATURE OF DEBT	DATE DEBT INCURRED *(mm/dd/yy)*	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Olga Pothorski 210 Jefferson Street Westville, IN 46391 LENDER'S OCCUPATION: Self		1,200.00	3/21/2026	0.00	1200.00
Olga Pothorski 210 Jefferson Street Westville, IN 46391 LENDER'S OCCUPATION: Self		351.50	04/02/2026	0.00	1551.50
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
			SUBTOTAL THIS PAGE OF SCHEDULE D		$ 1551.50
			TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY *(Enter total on ITEM 19 of the Summary Sheet.)*		$ 1551.50

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

(CFA-11)

State Form 48492 (R8 / 6-25)
Indiana Election Division (IC 3-9-5-20.1; 3-9-5-22)

INSTRUCTIONS: Only candidates receiving a "large contribution" are required to file this report. Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-11 REPORT

IS THIS AN AMENDMENT? ☐ Yes ☐ No

COMMITTEE INFORMATION

1. Full Name of Candidate *(Include any nickname.)* ☐ Check if this is a new name.	2. Committee Telephone Number
Olga Pothorski	(219) 380-7442

3. Mailing Address ***(Address where all campaign finance correspondence is received.)*** ☐ Check if this is a new address.
210 Jefferson St

4. City	State	ZIP Code	5. Party Affiliation or If Independent Candidate
Westville	IN	46391	Democratic

6. Office Sought *(Include district number, if any. Not required for exploratory committee.)*	7. County of Residence
County Council District 1	La Porte

8. Reporting Period ***(mm/dd/yy)***:
From: Through:

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 OR OTHER RECEIPT	*COLUMN A AMOUNT OF CONTRIBUTION*	*DATE RECEIVED & ACCEPTED (mm/dd/yy)* RECEIVED BY
Classification INDV 1. Greg Coulter 102 1/2 Georgia Ave Michigan City, IN 46360 Contributor's Occupation *(if applicable)*	Contributions: ☐ Direct ☒ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	$95.35	4/15/2026
Classification 2. Greg Coulter 102 1/2 Georgia Ave Michigan City, IN 46360 Contributor's Occupation *(if applicable)*	Contributions: ☐ Direct ☒ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	$1064.65	4/21/2026
Classification 3. Contributor's Occupation *(if applicable)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*		

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer	Title	Date *(mm/dd/yy)*
Signature of Candidate ***(if applicable)*** Olga Pothorski		Date *(mm/dd/yy)* 4-24-26

Warning: Any information contained in this report may not be copied for sale or used for any commercial purpose. *(IC 3-9-4-5)* A person who knowingly files a fraudulent report commits a Level 6 felony. *(IC 3-14-1-13)* A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor *(IC 3-14-1-14)*, and may be subject to civil penalties. *(IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18)*

FOR OFFICE USE ONLY

LaPorte County Received APR 24 2026 Election Board

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

FILE NUMBER: 46-26-59

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*) ☐ Check if this is a new name.
The Committee to Elect Olga

2. Acronym or Abbreviated Name *(if any)*
None

3. Committee Telephone Number
(219) 380-7442

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

5. City, State, ZIP Code
Westville, IN 46391

6. Party Affiliation *(if applicable)*
Democratic

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

7. Full Name of Candidate *(Include any nickname.)*
Olga Pothorski

8. Party Affiliation or If Independent Candidate
Democratic

9. Office Sought *(Include district number, if any. **Not required for exploratory committee.**)*
LaPorte County Council District 11

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: 04/11/26 Through: 10/09/26

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	955.00	
14. Cash on hand and investments January 1, current year.		0.00
CONTRIBUTIONS AND RECEIPTS		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		
15a. Itemized *(Use Schedule A.)*	3,703.66	5,455.16
15b. Unitemized	1,952.00	2,707.00
15c. Add lines 15a and 15b in both columns. **SUBTOTAL**	5,655.66	8,162.16
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. **TOTAL**	6,610.66	8,162.16
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(Use Schedule B.) (Public Question: use Schedule C.)*	3,411.73	4,963.23
17b. Unitemized	140.60	140.60
17c. Add lines 17a and 17b in both columns. **SUBTOTAL**	3,552.33	5,103.83
18. Cash on hand and investments at close of this reporting period *(Subtract 17c from 16 in both columns.)* **TOTAL**	3,058.33	3,058.33
19. Debts OWED BY the committee *(Use Schedule D.)*	11,551.50	
20. Debts OWED TO the committee *(Use Schedule E.)*	0.00	

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	Title	Date *(mm/dd/yy)*
	Treasurer	
Signature of Candidate *(if applicable)*		Date *(mm/dd/yy)*
Olga Pothorski		

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 OCT 16 2026 Election Board

9:44 am

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

Page 11 of 33

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. Greg Coulter 102 1/2 Georgia Ave Michigan City, IN 46360 Contributor's Occupation *(if required)* Foodservice worker	Contributions: ☐ Direct ■ In-Kind *(describe)* Printing Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	95.35	95.35	04/15/26 OP
2. Brittany Chernikovich 3233 n Neva Ave Chicago, IL 60634 Contributor's Occupation *(if required)*	Contributions: ■ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	200.00	200.00	04/16/26 OP
3. Greg Coulter 102 1/2 Georgia Ave Michigan City, IN 46360 Contributor's Occupation *(if required)* Foodservice worker	Contributions: ☐ Direct ■ In-Kind *(describe)* Signs Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	1,064.65	1,160.00	04/21/26 OP
4. Deborah Chubb 3630 Birchwood Trail Michigan City, IN 46360 Contributor's Occupation *(if required)*	Contributions: ■ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	750.00	750.00	05/04/26 OP
5. Nicole Messacar 1401 Illinois Ave La Porte, IN 46350 Contributor's Occupation *(if required)*	Contributions: ■ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	100.00	300.00	06/08/26 OP
	SUBTOTAL THIS PAGE OF SCHEDULE A	$2,210.00		
	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 (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

Page 22 of 33

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. Sharilyn Pisowicz 7252 W US Hwy 6 Westville, IN 46391 Contributor's Occupation *(if required)* _____	Contributions: ■ Direct ☐ In-Kind *(describe)* _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	100.00	150.00	06/18/26 OP
2. Olga Pothorski 210 Jefferson Street Westville, IN 46391 Contributor's Occupation *(if required)* Self-employed caterer	Contributions: ☐ Direct ■ In-Kind *(describe)* Apparel Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	268.83	1,830.33	06/23/26 OP
3. Olga Pothorski 210 Jefferson Street Westville, IN 46391 Contributor's Occupation *(if required)* Self-employed caterer	Contributions: ☐ Direct ■ In-Kind *(describe)* Video Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	150.00	1,980.33	09/03/26 OP
4. Ethan Messacar 1401 Illinois Ave La Porte, IN 46350 Contributor's Occupation *(if required)* _____	Contributions: ☐ Direct ■ In-Kind *(describe)* Video Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	150.00	150.00	09/10/26 OP
5. Brittany Chernikovich 3233 N Neva Ave Chicago, IL 60634 Contributor's Occupation *(if required)* _____	Contributions: ■ Direct ☐ In-Kind *(describe)* _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	200.00	400.00	09/25/26 OP
	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.)*	$		

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

Page 33 of 33

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. Nancy Moldenhauer 107 Kaye Lane Michigan City, IN 46360 Contributor's Occupation *(if required)* _____	Contributions: ■ Direct ☐ In-Kind *(describe)* _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	100.00	200.00	09/28/26 OP
2. Ethan Messacar 1401 Illinois Ave La Porte, IN 46350 Contributor's Occupation *(if required)* _____	Contributions: ☐ Direct ■ In-Kind *(describe)* Video Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	150.00	300.00	09/30/26 OP
3. Olga Pothorski 210 Jefferson Street Westville, IN 46391 Contributor's Occupation *(if required)* Self-employed caterer	Contributions: ☐ Direct ■ In-Kind *(describe)* Bubbles Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	53.45	2,033.78	09/30/26 OP
4. Olga Pothorski 210 Jefferson Street Westville, IN 46391 Contributor's Occupation *(if required)* Self-employed caterer	Contributions: ☐ Direct ■ In-Kind *(describe)* Apparel Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____	321.38	2,355.16	10/02/26 OP
5. Contributor's Occupation *(if required)* _____	Contributions: ☐ Direct ☐ In-Kind *(describe)* _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		$6324.83		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*		$37,703.66		

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

Page 11 of 88

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 AA Reprographic Arts, Inc. 2824 E Michigan Blvd Trail Creek, IN 46360	Printing / apparel	☐ Direct ■ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Campaign printing	95.35	95.35	04/15/26
Code AA Reprographic Arts, Inc. 2824 E Michigan Blvd Trail Creek, IN 46360	Printing / apparel	☐ Direct ■ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Yard signs	1,064.65	1,160.00	04/21/26
Code AA Boy-Conn Printers, Inc. 803 E Glendale Blvd Valparaiso, IN 46383	Printer	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Campaign printing	351.50	703.00	04/22/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	2.00	2.00	04/22/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	2.70	4.70	04/22/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	2.98	7.68	04/22/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	2.00	9.68	04/22/26
		SUBTOTAL THIS PAGE OF SCHEDULE B	$1,552.18		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(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

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 AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	2.00	11.68	04/22/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	3.00	14.68	04/22/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	3.00	17.68	04/22/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	3.00	20.68	04/22/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	6.12	26.80	04/23/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	2.00	28.80	04/23/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	3.00	31.80	04/23/26
	SUBTOTAL THIS PAGE OF SCHEDULE B		$22.12		
	TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY ***(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

Page 33 of 88

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 AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	2.00	33.80	04/23/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	2.08	35.88	04/23/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	2.00	37.88	04/23/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	11.00	48.88	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	10.00	58.88	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	10.00	68.88	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	10.00	78.88	04/24/26
		SUBTOTAL THIS PAGE OF SCHEDULE B	$447.08		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(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

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 AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	9.00	87.88	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	14.70	102.58	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	8.00	110.58	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	13.00	123.58	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	14.00	137.58	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	14.00	151.58	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	14.00	165.58	04/24/26
		SUBTOTAL THIS PAGE OF SCHEDULE B	$86.70		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(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

Page 55 of 88

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 AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	14.00	179.58	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	19.00	198.58	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	19.00	217.58	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	18.00	235.58	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	20.00	255.58	04/24/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	20.00	275.58	04/27/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	15.00	290.58	04/27/26
		SUBTOTAL THIS PAGE OF SCHEDULE B	$1225.00		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(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

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 AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	13.00	303.58	04/27/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	18.00	321.58	04/27/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	20.00	341.58	04/27/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	23.00	364.58	04/27/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	23.00	387.58	04/27/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	22.00	409.58	04/27/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	48.00	457.58	04/28/26
		SUBTOTAL THIS PAGE OF SCHEDULE B	$167.00		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(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

Page 7 of 8

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 AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	22.00	479.58	04/28/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	22.00	501.58	04/29/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	66.00	567.58	04/30/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	118.00	685.58	05/04/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	144.00	829.58	05/05/26
Code AA Meta Platforms, Inc. 1 Meta Way Menlo Park, CA 94025	Online advertising	■ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Facebook ads	30.44	860.02	05/21/26
Code AA Sabre Graphics & Apparel 6802 W 300 South Union Mills, IN 46382	Printing / apparel	☐ Direct ■ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Campaign apparel	268.83	268.83	06/23/26
		SUBTOTAL THIS PAGE OF SCHEDULE B	$671.27		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(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

Page 88 of 88

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 AA Ethan Messacar 1401 Illinois Ave La Porte, IN 46350	Video producer	☐ Direct ■ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Campaign video	150.00	150.00	09/03/26
Code AA Ethan Messacar 1401 Illinois Ave La Porte, IN 46350	Video producer	☐ Direct ■ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Campaign video	150.00	300.00	09/10/26
Code AA Ethan Messacar 1401 Illinois Ave La Porte, IN 46350	Video producer	☐ Direct ■ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Campaign video	150.00	450.00	09/30/26
Code AA Reprographic Arts, Inc. 2824 E Michigan Blvd Trail Creek, IN 46360	Printing / apparel	☐ Direct ■ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Campaign apparel	321.38	1,481.38	10/02/26
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B			$777713388		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY ***(Enter total on ITEM 17a of the Summary Sheet.)***			$33,44111.773		

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 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 11 of 1 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 / NATURE OF DEBT	DATE DEBT INCURRED *(mm/dd/yy)*	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Olga Pothorski 210 Jefferson Street Westville, IN 46391 LENDER'S OCCUPATION: Self-employed caterer	Parkman Advertising PO Box 226 Westville, IN 46392	1,200.00 Candidate advance Carried from prior report	03/21/26	0.00	1,200.00
Olga Pothorski 210 Jefferson Street Westville, IN 46391 LENDER'S OCCUPATION: Self-employed caterer	Boy-Conn Printers, Inc. 803 E Glendale Blvd Valparaiso, IN 46383	351.50 Candidate advance Carried from prior report	04/02/26	0.00	351.50
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
		SUBTOTAL THIS PAGE OF SCHEDULE D			$1,551.50
		TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY *(Enter total on ITEM 19 of the Summary Sheet.)*			$1,551.50