



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

Summary Sheet

FILE NUMBER

84-12-16

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 COMMITTEE TO ELECT MARK BIRD	
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number (812) 243-5576
4. Mailing Address (address where all campaign finance correspondence is received) ☐ Check if this is a new address 19 E. DOUGLAS PLACE	
5. City, State, ZIP Code TERRE HAUTE, IN 47803	6. Party Affiliation (if applicable) DEMOCRAT

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname) MARK BIRD	8. Party Affiliation or If Independent Candidate DEMOCRAT
9. Office Sought (Include district number, if any. Not required for exploratory committee.) COUNTY COUNCIL AT LARGE	10. County of Residence VIGO

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 10 days amend Statement of Organization)

CONVENTION CANDIDATES ONLY

Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting Period:		COLUMN A This Period	COLUMN B Year to Date
From: 1-1-12	Through: 4-13-12		
13. Cash on hand and investments at the beginning of this reporting period.		000.00	
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)		600.00	600.00
15b. Unitemized			
15c. Add lines 15a and 15b in both columns			
SUBTOTAL			
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B		600.00	600.00
TOTAL			
EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		136.73	136.73
17b. Unitemized			
17c. Add lines 17a and 17b in both columns		136.73	136.73
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)		463.27	463.27
TOTAL			
19. Debts OWED BY the committee (use Schedule D)		0	
20. Debts OWED TO the committee (use Schedule E)		0	

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
Signature of Candidate (if applicable) Mark Bird		Date 4-10-12

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 Class 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, IC 3-9-4-18)

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VIGO COUNTY SUPERIOR COURT

APR 12 2012

Patricia M. M...
CLERK



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**(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

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. MARK BIRD 19 E. DOUGLAS PL. TERRE HAUTE, IN 47603 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☒ Loan ☐ Misc. (specify)	300. ⁰⁰	300. ⁰⁰	4-10-12
2. PAUL MASON 3026 E. TRAVIS AVE. TERRE HAUTE, IN 47605 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	150. ⁰⁰	150. ⁰⁰	3-26-12
3. MIKE CIOLLI 5470 ALAN COURT TERRE HAUTE, IN 47605 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	150. ⁰⁰	150. ⁰⁰	3-23-12
4. Contributor's Occupation (if required)	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)			
5. Contributor's Occupation (if required)	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)			
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)		\$		



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**(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

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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
Code _____ WALMART 2399 S. ST. RD 46 TERRE HAUTE, IN 47803		☒ Direct ☐ In-Kind ☒ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: LUNCH FOR HIGHWAY DEPT.	45.83	45.83	4-3-12
Code _____ LITTLE CAESAR'S 1834 LAFRAYETTE AVE TERRE HAUTE, IN 47834		☐ Direct ☐ In-Kind ☒ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: LUNCH FOR HIGHWAY DEPT.	90.90	90.90	4-4-12
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			\$ 136.73		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$		