



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

TOTAL PAGES IN ENTIRE CFA-4 REPORT

3

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 Louis Joe Duby for City Council At Large

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(812) 240-5039

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

718 South 18th Street

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)

Louis Joe Duby

8. Party Affiliation or If Independent Candidate

Democrat

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

City 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:

From: Apr 11, 2015

Through: Dec 31, 2015

COLUMN A
This Period

COLUMN B
Year to Date

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

405.43

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)

1,050

5,250

15b. Unitemized

350

1,650

15c. Add lines 15a and 15b in both columns

SUBTOTAL

1,400

6,900

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

TOTAL

1,805.43

6,900

EXPENDITURES

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

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

1,781.82

6,745.78

17b. Unitemized

0

130.61

17c. Add lines 17a and 17b in both columns

SUBTOTAL

1,781.82

6,876.39

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

23.61

23.61

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)

Date

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)

FOR OFFICE USE ONLY

FILED
JAN 21 2016
COURT

JAN 21 2016

David R. Crockett
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 NUMBERPage 1 of 1

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. D. Atterson 6808 Wabash Avenue Terre Haute, IN 47803 Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____	\$500	\$500	04.13.15 KLHarbaugh
2. Baesler Market 2900 Poplar Street Terre Haute, IN 47803 Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____	\$250	\$250	04.24.15 KLHarbaugh
3. FSG Painting, LLC 1005 W. National Ave West Terre Haute, IN 47885 Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____	\$300	\$300	05.01.15 KLHarbaugh
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		\$1,050		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$1,050		

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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 NUMBERPage 1 of 1

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)				
Code <u>A</u> Tribune Star 222 S. 7 th Street Terre Haute, IN 47807	Advertising	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	\$1055.29	\$1055.29	04.29.15
Code <u>A</u> A+ Printing 219 West Church Street Brazil, IN 47834	Door Hangers	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	\$158.36	\$358.99	04.24.15
Code <u>A</u> Big Picture Advertising 608 N. 13 th Street Terre Haute IN 47807	Flyers	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	\$568.17	\$568.17	05.01.15
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			\$1,781.82		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$1781.82		