# 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 |
|---|
| 84-16-09 |
| **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
BURKE FOR CLERK COMMITTEE

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

3. Committee Telephone Number
(812) 208-0222

4. Mailing Address *(address where all campaign finance correspondence is received)* ☐ Check if this is a new address
555. 12TH ST.

5. City, State, ZIP Code
TERRE HAUTE, IN 47807

6. Party Affiliation *(if applicable)*
DEM

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

7. Full Name of Candidate *(include any nickname)*
KEVIN D. BURKE

8. Party Affiliation or If Independent Candidate
DEM

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

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: 1-1-16 Through: 4-3-16

| | 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)* | 250 00 | 250 00 |
| 15b. Unitemized | 1634.22 | 1634.22 |
| 15c. Add lines 15a and 15b in both columns **SUBTOTAL** | 1884.22 | 1884.22 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B **TOTAL** | 1884.22 | 1884.22 |
| **EXPENDITURES** | | |
| *(Note: These amounts include in-kind expenditures and loan repayments.)* | | |
| 17a. Itemized *(use Schedule B) (Public Question: use Schedule C)* | 818.91 | 818.91 |
| 17b. Unitemized | 0 | 0 |
| 17c. Add lines 17a and 17b in both columns **SUBTOTAL** | 818.91 | 818.91 |
| 18. Cash on hand and investments at close of this reporting period *(subtract 17c from 16 in both columns)* **TOTAL** | 1065.31 | 1065.31 |
| 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 TRES. Date 4-13-16

Signature of Candidate *(if applicable)* _____ Date 4-13-16

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

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David R. Crockett
APR 14 2016
Clerk of the
Vigo Circuit Court

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# (CFA-4 SCHEDULE C)
# ITEMIZED EXPENDITURES
## For Public Questions

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. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

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**PUBLIC QUESTION INFORMATION**

Enter Text of Public Question

Type of Question: ☐ Statewide ☑ Local
Position: ☐ Supported ☐ Opposed

| 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 |
|---|---|---|---|---|---|
| Code<br>ST. PATRICK PARADE<br>P.O. BOX 9849<br>TERRE HAUTE, IN 47808 | | ☑ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose:<br>ENTRY FEE | 40.00 | 40.00 | 2/17/16 |
| Code<br>CHECKS SUPERSTORE<br>7067 PRODUCTION CT.<br>FLORENCE, KY 41042 | | ☑ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose:<br>CHECKS | 11.92 | 11.92 | 2/5/16 |
| Code<br>JUSTYARDSIGNS.COM<br>4580 A1 DIST. COURT<br>ORLANDO, FL 32822 | | ☑ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose:<br>SIGNS | 612.50 | 612.50 | 2/8/16 |
| Code<br>GOTPRINT.COM<br>7651 N. SAN FERNANDO<br>BURBANK, CA 91505 | | ☑ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose:<br>CARDS | 16.76 | 16.76 | 2/9/16 |
| Code<br>PRINT RUNNER<br>5000 HASKELL AVE<br>VAN NUYS, CA 91406 | | ☑ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose:<br>STICKERS | 37.73 | 37.73 | 2/13/16 |
| Code<br>ST. MARGARET MARY<br>2405 S. 7TH ST.<br>TERRE HAUTE, IN 47802 | | ☑ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose:<br>RAFFLE | 100.00 | 100.00 | 3/7/16 |
| | | SUBTOTAL THIS PAGE OF SCHEDULE C | $88.91 | | |
| | | TOTAL OF ALL PAGES OF SCHEDULE C ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet) | $88.91 | | |

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# (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)*.

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| 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 / RECEIVED BY |
|---|---|---|---|---|
| 1. WRIGHT, SHAGLEY AND LOWERY P.C.<br>500 OHIO ST.<br>TERRE HAUTE, IN 47807 | Contributions:<br>☑ Direct<br>☐ In-Kind *(describe)*<br>Other Receipts:<br>☐ Interest ☐ Loan<br>☐ Misc. *(specify)* | 250 00 | 250 00 | 2-15-16<br>KDB |
| 2. | Contributions:<br>☐ Direct<br>☐ In-Kind *(describe)*<br>Other Receipts:<br>☐ Interest ☐ Loan<br>☐ Misc. *(specify)* | | | |
| 3. | Contributions:<br>☐ Direct<br>☐ In-Kind *(describe)*<br>Other Receipts:<br>☐ Interest ☐ Loan<br>☐ Misc. *(specify)* | | | |
| 4. | Contributions:<br>☐ Direct<br>☐ In-Kind *(describe)*<br>Other Receipts:<br>☐ Interest ☐ Loan<br>☐ Misc. *(specify)* | | | |
| 5. | Contributions:<br>☐ Direct<br>☐ In-Kind *(describe)*<br>Other Receipts:<br>☐ Interest ☐ Loan<br>☐ Misc. *(specify)* | | | |
| | SUBTOTAL THIS PAGE OF SCHEDULE A | $ 250 00 | | |
| | TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet)* | $ 250 00 | | |