



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

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

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) ☐ Check if this is a new name

COMMITTEE TO ELECT STACEE TODD

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(812) 870-0428

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

625 BARTON AV

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)

STACEE JOY TODD

8. Party Affiliation or If Independent Candidate

DEMOCRAT

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

RECORDER

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: APRIL 9 2016 Through: OCTOBER 14, 2016

COLUMN A
This Period

COLUMN B
Year to Date

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

14. Cash on hand and investments January 1, current year.

CONTRIBUTIONS AND RECEIPTS

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

15a. Itemized (use Schedule A)

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

TOTAL

EXPENDITURES

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

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

17b. Unitemized

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

SUBTOTAL

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

TOTAL

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.

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

RECEIVED
David R. Crockett

OCT 27 2016

Clerk of the
Vigo Circuit Court

 *** FAX ERROR TX REPORT ***

TX FUNCTION WAS NOT COMPLETED

JOB NO. 0506
 DESTINATION ADDRESS 82323113pp3745
 SUBADDRESS
 DESTINATION ID
 ST. TIME 10/21 14:18
 TX/RX TIME 00' 00
 PGS. 0
 RESULT NG
 0

#018 BUSY/NO SIGNAL

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 6000 (9/17/11-01)
 Indiana Election Commission (IC 3-3-5-14)

(CFA-4)

Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For
 candidates in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☐ No

COMMITTEE INFORMATION

1. Full Name of Committee (do not abbreviate or use initials) ☐ Check if this is a new name

COMMITTEE TO ELECT STAGE TODD

2. Acronym or Abbreviated Name (if any)

625 BARTON AV

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

625 BARTON AV

5. City, State, ZIP Code

TERRE HAUTE IN 47803

6. Party Affiliation (if applicable)

DEMOCRAT

7. Full Name of Candidate (include any nickname)

STAGE JOY TODD

8. Party Affiliation of Independent Candidate

DEMOCRAT

9. Office Sought (include district number, if any, not required for exploratory candidates)

REORDER

10. County of Residence

VIGO

11. Check one:

☒ Pre-Primary ☐ Pre-Election ☐ Amended ☐ Amendment ☐ Other☐ Pre-Convention ☐ Post-Convention

12. Reporting Period:

From: APRIL 9 2016 Through: OCTOBER 14 2016

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

14. Cash on hand and investments on January 1, current year.

15. Cash on hand and investments on December 31, current year.

16. Cash on hand and investments on December 31, current year.

17. Cash on hand and investments on December 31, current year.

18. Cash on hand and investments on December 31, current year.

19. Cash on hand and investments on December 31, current year.

20. Cash on hand and investments on December 31, current year.

21. Cash on hand and investments on December 31, current year.

22. Cash on hand and investments on December 31, current year.

23. Cash on hand and investments on December 31, current year.

24. Cash on hand and investments on December 31, current year.

25. Cash on hand and investments on December 31, current year.

26. Cash on hand and investments on December 31, current year.

27. Cash on hand and investments on December 31, current year.

28. Cash on hand and investments on December 31, current year.

29. Cash on hand and investments on December 31, current year.

30. Cash on hand and investments on December 31, current year.

31. Cash on hand and investments on December 31, current year.

32. Cash on hand and investments on December 31, current year.

33. Cash on hand and investments on December 31, current year.

34. Cash on hand and investments on December 31, current year.

35. Cash on hand and investments on December 31, current year.

36. Cash on hand and investments on December 31, current year.

37. Cash on hand and investments on December 31, current year.

38. Cash on hand and investments on December 31, current year.

FOR OFFICE USE ONLY

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: JACQUELINE HAMBURG Date: 10/21/16

Signature of Candidate (if applicable): JACQUELINE HAMBURG Date: 10/21/16

Signature of Candidate (if applicable): JACQUELINE HAMBURG Date: 10/21/16

Signature of Candidate (if applicable): JACQUELINE HAMBURG Date: 10/21/16

Signature of Candidate (if applicable): JACQUELINE HAMBURG Date: 10/21/16

Signature of Candidate (if applicable): JACQUELINE HAMBURG Date: 10/21/16

Signature of Candidate (if applicable): JACQUELINE HAMBURG Date: 10/21/16

Signature of Candidate (if applicable): JACQUELINE HAMBURG Date: 10/21/16

Signature of Candidate (if applicable): JACQUELINE HAMBURG Date: 10/21/16

Signature of Candidate (if applicable): JACQUELINE HAMBURG Date: 10/21/16

 *** TX REPORT ***

JOB NO. 0506
 ST. TIME 10/21 14:14
 SHEETS 10
 FILE NAME
 TX INCOMPLETE -----
 TRANSACTION OK -----
 ERROR 82323113pp3745

(CFA-4)
 Summary Sheet
 FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

REPORT OF RECEIPTS AND EXPENDITURES
 OF A POLITICAL COMMITTEE

State Form 400 (1/1/14)
 Public Election Commission (10-19-14)

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 STACEE TODD

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(812) 870-0428

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

625 BARTON AV

5. City, State, ZIP Code

TERRE HAUTE IN 47803

6. Party Affiliation (if applicable)

DEMOCRAT

7. Full Name of Candidate (include any nickname)

STACEE JOY TODD

8. Office Sought (include district number, if any. Not required for non-legislative candidates.)

RECORDER

9. County of Residence

VIGO

TYPE OF REPORT

11. Check one:

☒ 11a Primary Election ☐ Annual ☐ Nomination ☐ Other

☐ 11b Legislative Committee (see 11c, 1d, and 1e on line 9) ☐ Outgoing Treasurer (see Statement of Organization)

12. Reporting Period:

From: APRIL 9 2016 To: OCTOBER 14 2016

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

14. Cash on hand and investments January 1, current year.

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

15a. Received (see Schedule A)

15b. Utilized

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

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

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

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

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

17a. Received (see Schedule B) (Include Question 16c Schedule C)

17b. Utilized

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

18. Cash on hand and investments at close of the reporting period (transfer 17c from 15 in both columns)

19. Credits OWED BY the committee (see Schedule D)

20. Credits OWED TO the committee (see Schedule E)

CERTIFICATION

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

Signature of Treasurer

Signature of Candidate (if applicable)

Signature of Committee Chair

Signature of Committee Secretary

Signature of Committee Member

Signature of Committee Member

Signature of Committee Member

Signature of Committee Member

FOR OFFICE USE ONLY

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE