



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE (CFA-4)

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

Summary Sheet

FILE NUMBER

INDY05

TOTAL PAGES IN ENTIRE CFA-4 REPORT

1

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 Re-elect Judge Rade

2. Acronym or Abbreviated Name (if any)

none

3. Committee Telephone Number

4. Mailing Address (address where all committee financial correspondence is received)

☐ Check if this is a new address

5. City, State, ZIP Code

Terre Haute, IN 47607

6. Party Affiliation (if applicable)

Democrat

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)

Michael R. ("Mike") Rade

8. Party Affiliation or If Independent Candidate

Democrat

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

Judge of Vigo Superior Court Dist

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: Jan 1, 2014 Through: April 11, 2014

COLUMN A
This Period

COLUMN B
Year to Date

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

4. 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.)

5a. Itemized (use Schedule A)

5b. Unitemized

5c. Add lines 15a and 15b in both columns

SUBTOTAL

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

TOTAL

-0-
\$100
\$100
\$100

-0-
\$100
\$100
\$100

EXPENDITURES

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

6a. Itemized (use Schedule B) (Public Question: use Schedule C)

6b. Unitemized

6c. Add lines 17a and 17b in both columns

SUBTOTAL

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

TOTAL

-0-
\$100
-0-
-0-

-0-
\$100
-0-
-0-

7. Debts OWED BY the committee (use Schedule D)

8. Debts OWED TO the committee (use Schedule E)

-0-
-0-

CERTIFICATION

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

Signature of Treasurer

Cheryl Rader

Title

Treasurer

Date

4/11/2014

Signature of Candidate (if applicable)

Michael Rade

Date

04/11/2014

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 makes 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

FOR FILING

VIGO SUPERIOR COURT

APR 15 2014

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David R. Coady
CLERK