



# REPORT OF RECEIPTS AND EXPENDITURES A POLITICAL COMMITTEE

State Form 4606 (R14 / 10-17)  
Indiana Election Division (IC 3-9-5-14)

OF

(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 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) <input type="checkbox"/> Check if this is a new name.<br><b>COMMITTEE TO ELECT GORDON PLEUS</b>           |                                                    |
| 2. Acronym or Abbreviated Name (if any)                                                                                                                               | 3. Committee Telephone Number<br>( )               |
| 4. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address.<br><b>2159 POPLAR ST</b> |                                                    |
| 5. City, State, ZIP Code<br><b>TERRE HAUTE, IN 47803</b>                                                                                                              | 6. Party Affiliation (if applicable)<br><b>DEM</b> |

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

|                                                                                                                                        |                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| 7. Full Name of Candidate (Include any nickname.)<br><b>GORDON D. PLEUS</b>                                                            | 8. Party Affiliation or if Independent Candidate<br><b>DEM</b> |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.)<br><b>VIGO COUNTY COMMISSIONER/COUNCIL</b> | 10. County of Residence<br><b>VIGO</b>                         |

### TYPE OF REPORT

|                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|
| 11. Check one:<br><input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other<br><input type="checkbox"/> Final / Disbands Committee (Lines 18, 19, and 20 must be "0.") <input type="checkbox"/> Outgoing Treasurer (Within ten (10) days amend Statement of Organization.) | CONVENTION CANDIDATES ONLY<br>Check one:<br><input type="checkbox"/> Pre-Convention<br><input type="checkbox"/> Post-Convention |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|

| 12. Reporting Period (mm/dd/yy):<br>From: <b>01-01-18</b> Through: <b>12-31-18</b> | COLUMN A<br>This Period | COLUMN B<br>Year to Date |
|------------------------------------------------------------------------------------|-------------------------|--------------------------|
| 13. Cash on hand and investments at the beginning of this reporting period.        | <b>\$3.00</b>           | <b>\$3.00</b>            |
| 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.)                                                               | 0             | 0             |
| 15b. Unitemized                                                                               | 0             | 0             |
| 15c. Add lines 15a and 15b in both columns.                                                   | 0             | 0             |
| <b>SUBTOTAL</b>                                                                               | 0             | 0             |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.                        | <b>\$3.00</b> | <b>\$3.00</b> |
| <b>TOTAL</b>                                                                                  | <b>\$3.00</b> | <b>\$3.00</b> |

### EXPENDITURES

|                                                                                                            |                  |  |
|------------------------------------------------------------------------------------------------------------|------------------|--|
| (Note: These amounts include in-kind expenditures and loan repayments.)                                    |                  |  |
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)                                         | 0                |  |
| 17b. Unitemized                                                                                            | 0                |  |
| 17c. Add lines 17a and 17b in both columns.                                                                | 0                |  |
| <b>SUBTOTAL</b>                                                                                            | 0                |  |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) | <b>\$3.00</b>    |  |
| <b>TOTAL</b>                                                                                               | <b>\$3.00</b>    |  |
| 19. Debts OWED BY the committee (Use Schedule D.)                                                          | <b>\$5258.75</b> |  |
| 20. Debts OWED TO the committee (Use Schedule E.)                                                          | <b>0.00</b>      |  |

### 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<br><b>Gordon D. Pleus</b>                                                                        | Title<br><b>CANDIDATE</b> | Date (mm/dd/yy)<br><b>1/31/19</b> |
| Signature of Candidate (if applicable)<br><b>Gordon D. Pleus</b>                                                        |                           | Date (mm/dd/yy)<br><b>1/31/19</b> |

**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 Level 6 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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COUNTY SUPERIOR COURT  
**JAN 14 2019**  
*Brenda M. [Signature]*  
CLERK