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# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

(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 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 George Azar

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(812) 239-8054

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

431 Wabash Avenue

5. City, State, ZIP Code

Terre Haute, IN

6. Party Affiliation (if applicable)

Democrat

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

7. Full Name of Candidate (Include any nickname.)

George James Azar

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 (if lines 12, 13, and 14 must be "0") ☐ Outgoing Treasurer (Within 10 days ending Statement of Organization.)

### CONVENTION CANDIDATES ONLY

Check one:

☐ Pre-Convention  
☐ Post-Convention

12. Reporting Period (mm/dd/yy):

From: 01/01/2019

Through: 04/12/2019

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

COLUMN A  
This Period

1,473.61

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

COLUMN B  
Year to Date

1,473.61

### CONTRIBUTIONS AND RECEIPTS

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

15a. Itemized (Use Schedule A.)

700.00

15b. Unitemized

550.00

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

SUBTOTAL

1,250.00

1,250.00

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

TOTAL

2,723.61

2,723.61

### EXPENDITURES

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

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

1,244.87

1,244.87

17b. Unitemized

100.00

100.00

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

SUBTOTAL

1,344.87

1,344.87

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

TOTAL

1,378.74

1,378.74

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

Treasurer

Date (mm/dd/yy)

04/12/2019

Signature of Candidate (if applicable)

Date (mm/dd/yy)

04/12/2019

FOR OFFICE USE ONLY

**FILED**

VIGO COUNTY SUPERIOR COURT

APR 12 2019

*TS. [Signature]*  
CLERK

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-6) 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 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)


**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**

 State Form 4806 (R14 / 10-17)  
 Indiana Election Division (IC 3-9-5-14)

**(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 NUMBER**

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| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)        | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT                                                                                                                                                                                                                  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE RECEIVED<br>(mm/dd/yy)<br>RECEIVED BY |
|------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|--------------------------------------------|
| 1. Anthony Lanoos<br>201 Ohio Street<br>Terre Haute, IN 47807<br><br>Contributor's Occupation (if required)      | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) | \$200.00                          | \$200.00                               | 04/02/2019                                 |
| 2. George Bittar<br>2723 South 7th Street<br>Terre Haute, IN 47802<br><br>Contributor's Occupation (if required) | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) | \$500.00                          | \$500.00                               | 04/08/2019                                 |
| 3.<br><br>Contributor's Occupation (if required)                                                                 | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)            |                                   |                                        |                                            |
| 4.<br><br>Contributor's Occupation (if required)                                                                 | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)            |                                   |                                        |                                            |
| 5.<br><br>Contributor's Occupation (if required)                                                                 | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)            |                                   |                                        |                                            |
| <b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>                                                                          |                                                                                                                                                                                                                                                           | \$ 700.00                         |                                        |                                            |
| <b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b><br>(Enter total on ITEM 15a of the Summary Sheet.) |                                                                                                                                                                                                                                                           | \$                                |                                        |                                            |


**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**

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

**(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 NUMBER

Page \_\_\_\_\_ of \_\_\_\_\_

| RECIPIENT'S NAME AND MAILING ADDRESS<br>(street, number, city, state, ZIP code)                                  | RECIPIENT'S OCCUPATION<br>OFFICE SOUGHT (if applicable) | TYPE OF EXPENDITURE<br>and<br>PURPOSE (be specific)                                                                                                                                                                                 | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE<br>(mm/dd/yy) |
|------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|--------------------------------------|
| Code _____<br>Lamar Advertising<br>4701 E Margaret Drive<br>Terre Haute, IN 47803                                |                                                         | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: _____ | \$850.00                          | \$850.00                               | 03/01/2019                           |
| Code _____<br>Capital One<br>P.O. Box 4199<br>Houston, TX 77210-4199                                             |                                                         | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: _____            | \$394.87                          | \$394.87                               | 04/08/2019                           |
| Code _____                                                                                                       |                                                         | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: _____            |                                   |                                        |                                      |
| Code _____                                                                                                       |                                                         | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: _____            |                                   |                                        |                                      |
| Code _____                                                                                                       |                                                         | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: _____            |                                   |                                        |                                      |
| Code _____                                                                                                       |                                                         | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: _____            |                                   |                                        |                                      |
| Code _____                                                                                                       |                                                         | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: _____            |                                   |                                        |                                      |
| <b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>                                                                          |                                                         |                                                                                                                                                                                                                                     | \$ 1,244.87                       |                                        |                                      |
| <b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b><br>(Enter total on ITEM 17a of the Summary Sheet.) |                                                         |                                                                                                                                                                                                                                     | \$                                |                                        |                                      |