



# 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) <input type="checkbox"/> Check if this is a new name.<br><i>Committee to Elect Dave Crockett</i>                |                                                         |
| 2. Acronym or Abbreviated Name (if any)                                                                                                                                     | 3. Committee Telephone Number<br><i>(812) 870-9487</i>  |
| 4. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address.<br><i>3461 S. Westwood Pl.</i> |                                                         |
| 5. City, State, ZIP Code<br><i>West Terre Haute, IN 47885</i>                                                                                                               | 6. Party Affiliation (if applicable)<br><i>Democrat</i> |

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

|                                                                                             |                                                                     |
|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| 7. Full Name of Candidate (Include any nickname.)<br><i>David R. (Dave) Crockett</i>        | 8. Party Affiliation or If Independent Candidate<br><i>Democrat</i> |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.) | 10. County of Residence<br><i>Vigo</i>                              |

### TYPE OF REPORT

### CONVENTION CANDIDATES ONLY

|                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| 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.) | Check one:<br><input type="checkbox"/> Pre-Convention<br><input type="checkbox"/> Post-Convention |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|

|                                                                                  |                                          |                                           |
|----------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------|
| 12. Reporting Period (mm/dd/yy):<br>From: <i>1/1/19</i> Through: <i>12/31/19</i> | COLUMN A<br>This Period<br><i>693.92</i> | COLUMN B<br>Year to Date<br><i>693.92</i> |
| 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.)                                                               | <i>-0-</i>       | <i>-0-</i>       |
| 15b. Unitemized                                                                               | <i>-0-</i>       | <i>-0-</i>       |
| 15c. Add lines 15a and 15b in both columns. SUBTOTAL                                          | <i>-0-000</i>    | <i>-0-000</i>    |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL                  | <i>693.92000</i> | <i>693.92000</i> |

### EXPENDITURES

|                                                                                                                  |                  |                  |
|------------------------------------------------------------------------------------------------------------------|------------------|------------------|
| (Note: These amounts include in-kind expenditures and loan repayments.)                                          |                  |                  |
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)                                               | <i>-0-</i>       | <i>-0-</i>       |
| 17b. Unitemized                                                                                                  | <i>-0-</i>       | <i>-0-</i>       |
| 17c. Add lines 17a and 17b in both columns. SUBTOTAL                                                             | <i>-0-000</i>    | <i>-0-000</i>    |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) TOTAL | <i>693.92000</i> | <i>693.92000</i> |
| 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<br><i>[Signature]</i>                       | Title<br><i>Treasurer</i> | Date (mm/dd/yy)<br><i>1/13/20</i>  |
| Signature of Candidate (if applicable)<br><i>David R. Crockett</i> |                           | Date (mm/dd/yy)<br><i>01-14-20</i> |

**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 Election Code commits a Level 6 felony. (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 Election Code commits a Level 6 felony. (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 Election Code commits a Level 6 felony.

FOR OFFICE USE ONLY

**FILED**

VIGO COUNTY SUPERIOR COURT

**JAN 14 2020**

*[Signature]*  
CLERK