



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15/5-19)

Indiana Election Division (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. <i>Committee to elect Tess Brooks - Stephens</i>	
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number <i>(317) 908-6231</i>
4. Mailing Address (Address where all campaign finance correspondence is received.) ☐ Check if this is a new address. <i>2004 North 21st</i>	
5. City, State, ZIP Code <i>Terre Haute, Indiana</i>	6. Party Affiliation (if applicable) <i>Democratic</i>

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (Include any nickname.) <i>Tess Brooks - Stephens</i>	8. Party Affiliation or If Independent Candidate <i>Democratic</i>
9. Office Sought (Include district number, if any. Not required for exploratory committee.) <i>City Council District 3</i>	10. County of Residence <i>Vigo</i>

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. Check one: ☐ Pre-Primary ☐ Pre-Election ☒ Annual ☐ Nomination ☐ Other _____ ☐ Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) ☐ Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)	Check one: ☐ Pre-Convention ☐ Post-Convention
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12. Reporting Period (mm/dd/yy): From: <i>01/01/2019</i> Through: <i>12/31/2019</i>	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.)	<i>9,366.00</i>	
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	<i>9,366.00</i>	

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	<i>1,865.88</i>	
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	<i>1,865.88</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 <i>Anna Stephens</i>	Title <i>Treasurer</i>	Date (mm/dd/yy) <i>01/07/2020</i>
Signature of Candidate (if applicable) <i>Tess Brooks - Stephens</i>		Date (mm/dd/yy) <i>01/07/2020</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 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

FILED

VIGO COUNTY SUPERIOR COURT

JAN 13 2020

Tracy M. [Signature]
CLERK



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19)
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

Page _____ of _____

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy)
				RECEIVED BY
1. <u>Todd Boland</u> Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	100.00		4/15/2019
2. <u>Peggy & Mike Esau</u> <u>2147 Poplar Poplar St</u> <u>Terr Haute, IN 47803</u> Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	100.00		4/16/2019
3. <u>Meredith L. Varner</u> <u>25 Hamilton Dr.</u> <u>Terr Haute, IN 47803</u> Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	350.00		4/29/2019
4. <u>Wagner, Crawford, Camblitt and</u> <u>Junger</u> Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☒ In-Kind (describe) <u>legal services</u> Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	7,500		3/18/2019 - 4/17/2019
5. <u>Amos Stephens Jr. & Teri Brooks -</u> <u>Stephens</u> Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	710.00		3/7, 12, 26, 27/2019
<u>Elaene Brown</u> Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	100.00		3/8/2019
SUBTOTAL THIS PAGE OF SCHEDULE A		\$		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$	8,840	



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OF A POLITICAL COMMITTEE**

State Form 4606 (R15/5-19)
Election Division (IC 3-9-5-14)

Indiana

**(CFA-4 SCHEDULE A-2)
CONTRIBUTIONS BY CORPORATIONS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS 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 corporations **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*).

FILE NUMBER

Page _____ of _____

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy)
				RECEIVED BY
1.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
2.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
3.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
4.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
5.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$		



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State Form 4606 (R15/5-19)

Election Division (IC 3-9-5-14)

Indiana

**(CFA-4 SCHEDULE A-3)
CONTRIBUTIONS BY
LABOR ORGANIZATIONS**

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS 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 labor organizations **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).

FILE NUMBER

Page _____ of _____

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy)
				RECEIVED BY
1.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
2.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
3.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
4.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
5.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$		



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

State Form 4606 (R15/5-19)
Indiana Election Division (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-4)
CONTRIBUTIONS BY
POLITICAL ACTION COMMITTEES**
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES 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 political action committees **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees **MUST** be itemized on this schedule. 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).

FILE NUMBER

Page _____ of _____

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy)	
				RECEIVED BY	
1.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____				
2.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____				
3.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____				
4.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____				
5.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____				
SUBTOTAL THIS PAGE OF SCHEDULE A		\$			
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$			



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State Form 4606 (R15/5-19)
Indiana Election Division (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-5)
CONTRIBUTIONS BY
OTHER ORGANIZATIONS**

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND 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 other entities **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees **MUST** be itemized on this schedule. 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).

FILE NUMBER

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy)
				RECEIVED BY
1. Committee to elect Chris Gombill	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	500.00		2/20/2019
2.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
3.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
4.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
5.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$500.00		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

4606 (R15 / 5-19)

Indiana Election Division (IC 3-9-5-14)

State Form

(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

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code _____ Committee to elect Chris Carroll	VOTED	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Palm Canal, Banner, + stickers	500.00		
Code _____ Presstime Graphics 1016 Poplar St. Terre Haute, IN 47807		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Palm Canal, Banner + stickers	434.00 24.00		2/14/2019 3/13/2019
Code _____ Walash Food Services 812-882-8371		☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Campaign Candy	86.93		3/9/2019
Code _____ Shirts-N-Things 1115 Country Club Rd Joliet, IL 60434		☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: T-Shirts	241.28		3/11/2019
Code _____ Big Picture 608 N 13th St. Terre Haute, IN 47807		☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Campaign	50.00		3/15/2019
Code _____ CVS 812-232-1410		☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Campaign Candy	11.17		3/19/2019
Code _____ Union Signs + Printing 1 A. Eastern Ave Sahiet, IL 60433		☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Signs	687.50		3/20/2019
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 1750.88		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$ 1865.88		



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

State Form 4606 (R15/5-19)
Indiana Election Division (IC 3-9-5-14)

**(CFA-4 SCHEDULE C)
ITEMIZED EXPENDITURES
For Public Questions**

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. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, **MUST** be itemized on this schedule.

FILE NUMBER

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PUBLIC QUESTION INFORMATION

Enter Text of Public Question.

Type of Question: ☐ Statewide ☐ Local

Position: ☐ Supported ☐ Opposed

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code _____ Sarah Scott Middle School		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Campaigning/Request	50.00		5/10/2019
Code _____ NAACP		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Budget Campaigning	65.00		16/21/2019
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE C			\$ 115.00		
TOTAL OF ALL PAGES OF SCHEDULE C ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$ 115.00		



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

State Form 4606 (R15/5-19)
Election Division (IC 3-9-5-14)

Indiana

**(CFA-4 SCHEDULED)
DEBTS OWED BY THIS COMMITTEE**

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. List all debts and loans, regardless of the amount, **OWED BY** the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER

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CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED (mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD	
		NATURE OF DEBT				
LENDER'S OCCUPATION:						
LENDER'S OCCUPATION:						
LENDER'S OCCUPATION:						
LENDER'S OCCUPATION:						
LENDER'S OCCUPATION:						
LENDER'S OCCUPATION:						
SUBTOTAL THIS PAGE OF SCHEDULED					\$	
TOTAL OF ALL PAGES OF SCHEDULED ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.)					\$	



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

State Form 4606 (R15/5-19)
Indiana Election Division (IC3-9-5-14)

**(CFA-4 SCHEDULE E)
DEBTS OWED TO THIS COMMITTEE**

FILE NUMBER

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. List all debts and loans, regardless of the amount, **OWED TO** the committee during the reporting period. Include all amounts the committee has loaned to others.

Page _____ of _____

BORROWER'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	CO-SIGNER'S NAME AND MAILING ADDRESS <i>(if any)</i> <i>(street, number, city, state, ZIP code)</i>	ORIGINAL AMOUNT	DATE DEBT INCURRED <i>(mm/dd/yy)</i>	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
SUBTOTAL THIS PAGE OF SCHEDULE E					\$
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY <i>(Enter total on ITEM 20 of the Summary Sheet.)</i>					\$