



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

3

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 Aaron Loudermilk

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(812) 239-5670

4. Mailing Address (Address where all campaign finance correspondence is received.)

☐ Check if this is a new address.

5. City, State, ZIP Code

6. Party Affiliation (if applicable)

Democrat

CANDIDATE INFORMATION (For Candidate's Committees Only)

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

Aaron Dale Loudermilk

8. Party Affiliation or If Independent Candidate

Democrat

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

County Council - at - Large

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 ten (10) days amend Statement of Organization.)

CONVENTION CANDIDATES ONLY

Check one:

☐ Pre-Convention ☐ Post-Convention

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

From: 10/10/20 Through: 12/31/20

COLUMN A
This Period

5989.59

COLUMN B
Year to Date

.00

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.)

6,000.00

10,100.00

15b. Unitemized

996.00

3,746.00

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

SUBTOTAL

1,996.00

13,846.00

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

TOTAL

7,985.59

13,846.00

EXPENDITURES

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

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

3,186.00

8,742.22

17b. Unitemized

45.00

349.19

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

SUBTOTAL

3,231.00

9,091.41

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

TOTAL

4,754.59

4,754.59

19. Debts OWED BY the committee (Use Schedule D.)

.00

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

[Signature]

Title

Treasurer

Date (mm/dd/yy)

1/14/21

FOR OFFICE USE ONLY

FILED

VIGO COUNTY SUPERIOR COURT

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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 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

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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. I.B.E.W. Local Union #725 Political Fund 5675 E. Hulman Dr. Terre Haute, In. 47803-9752	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	250.00	250.00	10/15/20 Daron Loudermilk
2. Indiana Realtors - Political Action Committee 143 W. Market St., Suite 100 Indianapolis, In. 46204	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	750.00	750.00	10/29/20 Daron Loudermilk
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)			



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(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	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
	OFFICE SOUGHT (if applicable)				
Code A DLC Media, Inc. 111 West National Ave. Brazil, In. 47834		☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	2336. ⁰⁰	2336. ⁰⁰	10/13/20
Code A Aaron Loudermilk (Reimbursement) Facebook political ads from 10/15/20 - 10/21/20		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☒ Other Reimbursement Purpose:	350. ⁰⁰	350. ⁰⁰	12/30/20
Code O Aaron D. Loudermilk 5019 PAR 4 LANE TERRACE HAVEN, IN. 47802		☐ Direct ☐ In-Kind ☒ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	500. ⁰⁰	500. ⁰⁰	12/30/20
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:			