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

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

FILE NUMBER
TOTAL PAGES IN ENTIRE CFA-4 REPORT
3

COMMITTEE INFORMATION

1. Full Name of Committee (as on *Statement of Organization*) ☐ Check if this is a new name.
Myers for VCSC Board

2. Acronym or Abbreviated Name *(if any)*

3. Committee Telephone Number
(812) 201-0264

4. Mailing Address *(Address where all campaign finance correspondence is received.)* ☐ Check if this is a new address.
2613 Maple Avenue

5. City, State, ZIP Code
Terre Haute, IN 47804

6. Party Affiliation *(if applicable)*

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

7. Full Name of Candidate *(Include any nickname.)*
Leah Myers

8. Party Affiliation or If Independent Candidate
Democrat

9. Office Sought *(Include district number, if any. Not required for exploratory committee.)*
Vigo County School Board, District 1

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: 12/31/19 Through: 10/28/20

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	184.25	
14. Cash on hand and investments January 1, current year.		184.25
CONTRIBUTIONS AND RECEIPTS *(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)*		
15a. Itemized *(Use Schedule A.)*	850.00	850.00
15b. Unitemized	275.99	275.99
15c. Add lines 15a and 15b in both columns. **SUBTOTAL**	1,125.99	1,125.99
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. **TOTAL**	1,310.24	1,310.24
EXPENDITURES *(Note: These amounts include in-kind expenditures and loan repayments.)*		
17a. Itemized *(Use Schedule B.) (Public Question: use Schedule C.)*	753.04	753.04
17b. Unitemized	154.82	154.82
17c. Add lines 17a and 17b in both columns. **SUBTOTAL**	907.86	907.86
18. Cash on hand and investments at close of this reporting period *(Subtract 17c from 16 in both columns.)* **TOTAL**	402.38	402.38
19. Debts OWED BY the committee *(Use Schedule D.)*	0.00	
20. Debts OWED TO the committee *(Use Schedule E.)*	0.00	

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	Date *(mm/dd/yy)*
Leah Myers	Candidate	11/15/20
Signature of Candidate *(if applicable)*		Date *(mm/dd/yy)*

FOR OFFICE USE ONLY

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)*

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(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 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. Lean Myers 2613 Maple Avenue Terre Haute, IN 47804 Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☑ Loan ☐ Miscellaneous *(specify)*	$850.00	$850.00	6/10/20
2. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
3. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
4. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
5. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
SUBTOTAL THIS PAGE OF SCHEDULE A		$ 850.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*		$ 850.00		