



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)

Indiana Election Commission (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 <u>Committee to Elect Mike Morris Commissioner</u>	
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number <u>(812) 249-2995</u>
4. Mailing Address (address where all campaign finance correspondence is received) ☐ Check if this is a new address <u>3205 Erie Canal Rd</u>	
5. City, State, ZIP Code <u>Terre Haute Indiana 47802</u>	6. Party Affiliation (if applicable) <u>Republican</u>

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname) <u>Ivan M Morris Mike</u>	8. Party Affiliation or If Independent Candidate <u>Republican</u>
9. Office Sought (Include district number, if any. Not required for exploratory committee.) <u>County Commissioner District 3</u>	10. County of Residence <u>Vigo</u>

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 10 days amend Statement of Organization)	Check one: ☐ Pre-Convention ☐ Post-Convention
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12. Reporting Period: From: _____ Through: _____	COLUMN A This Period	COLUMN B Year to Date
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13. Cash on hand and investments at the beginning of this reporting period.	1639.55	
14. Cash on hand and investments January 1, current year.		2639.55

CONTRIBUTIONS AND RECEIPTS

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

15a. Itemized (use Schedule A)	19,346.05	52,287.12
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15b. Unitemized		
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15c. Add lines 15a and 15b in both columns	SUBTOTAL	
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16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	20,985.60	54,927.22
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EXPENDITURES

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

17a. Itemized (use Schedule B) (Public Question: use Schedule C)	18,846.05	51,787.12
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17b. Unitemized		
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17c. Add lines 17a and 17b in both columns	SUBTOTAL	
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18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	2139.55	3140.10
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19. Debts OWED BY the committee (use Schedule D)		
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20. Debts OWED TO the committee (use Schedule E)		
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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 <u>Ivan M Morris</u>	Title <u>Treasurer</u>	Date <u>1/20/21</u>
Signature of Candidate (if applicable)		Date

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 Class D 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 20 2021

Brenda M. [Signature]
CLERK


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OF A POLITICAL COMMITTEE**

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Indiana Election Commission (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 (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
Code _____ Indiana State Republican Party Indianapolis IN	Indiana Republican Party	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	17,205.27		11/9/20
Code _____ Cardinal Contact LLC 610 Midnight Ct Indianapolis, IN 462-39		☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	440.78		11/9/20
Code _____ Sway Marketing 1956th Street Terre Haute IN 47807		☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	1200.00		10/31/20
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:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$18846.05		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$		


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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

Page 1 of 2

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 RECEIVED BY
1. Ivan M Morris & Linda Morris 3205 Erie Canal Rd Terre Haute IN 47802 Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	\$1200.00		10/31/20 IMM
2. Ivan M Morris & Linda Morris 3205 Erie Canal Rd Terre Haute, IN 47802 Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	\$17,205.27		11/9/20 IMM
3. Ivan M Morris & Linda Morris 3205 Erie Canal Rd. Terre Haute IN 47802 Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	\$440.78		11/9/20 IMM
4. Sanjay B Patel / Cathy A Patel 1501 Continental Dr. Zionsville IN 46077 Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	500.00		10/9/20
5. Thomas C Longest 8320 Craig St Indianapolis IN 46250 Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	1000.00		10/5/20 IMM
SUBTOTAL THIS PAGE OF SCHEDULE A		\$18346.05		
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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FILE NUMBER

Page 2 of 2

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 RECEIVED BY
1. James Bowen 5256 Flintlock Ct Terre Haute, IN 47803 Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____	100.00		11/2/20 IMM
2. _____ Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____			
3. _____ Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____			
4. _____ Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____			
5. _____ Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$100.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$19446.05		


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**(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 1 of 1

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 RECEIVED BY
1. DPBG Political Action Committee 9025 River Road Indianapolis IN 46240	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	500.00		10/15/20 IMM
2.	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)			
3.	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)			
4.	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)			
5.	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 500.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$ 500.00		