REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R17 / 8-23)
Indiana Election Division (IC 3-9-5-14)

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT
10

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 Michelle Edwards - City Clerk

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

3. Committee Telephone Number
(812) 298-6488

4. Mailing Address *(Address where all campaign finance correspondence is received.)* ☐ Check if this is a new address.
1010 Helen Avenue

5. City, State, ZIP Code
Terre Haute, IN 47802

6. Party Affiliation *(if applicable)*
Democrat

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

7. Full Name of Candidate *(Include any nickname.)*
Michelle L Edwards

8. Party Affiliation or If Independent Candidate
Democrat

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

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: 01/01/2024 Through: 12/31/2024	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	588.33	
14. Cash on hand and investments January 1, current year.		588.33
CONTRIBUTIONS AND RECEIPTS		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		
15a. Itemized *(Use Schedule A.)*	0.00	0.00
15b. Unitemized	0.00	0.00
15c. Add lines 15a and 15b in both columns. **SUBTOTAL**	0.00	0.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. **TOTAL**	588.33	588.33
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(Use Schedule B.) (Public Question: use Schedule C.)*	340.68	340.68
17b. Unitemized	239.00	239.00
17c. Add lines 17a and 17b in both columns. **SUBTOTAL**	579.68	579.68
18. Cash on hand and investments at close of this reporting period *(Subtract 17c from 16 in both columns.)* **TOTAL**	8.65	8.65
19. Debts OWED BY the committee *(Use Schedule D.)*	1,055.52	
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)*
Michelle L Edwards	CITY CLERK	01-14-2025
Signature of Candidate *(if applicable)*		Date *(mm/dd/yy)*
Michelle L Edwards		01-14-2025

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

REC'D ABSENTEE VOTERS
'25 JAN 14 PM3:18:09

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R17 / 8-23)
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 2 of 10

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. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* ____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)* ____			
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		$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*		$ 0.00		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R17 / 8-23)
Indiana Election Division (IC 3-9-5-14)

(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 3 of 10

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	$ 0.00		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY ***(Enter total on ITEM 15a of the Summary Sheet.)***	$ 0.00		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R17 / 8-23)
Indiana Election Division (IC 3-9-5-14)

(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 4 of 10

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	$ 0.00		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY ***(Enter total on ITEM 15a of the Summary Sheet.)***	$ 0.00		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R17 / 8-23)
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 5 of 10

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	$ 0.00		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY ***(Enter total on ITEM 15a of the Summary Sheet.)***	$ 0.00		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R17 / 8-23)
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

Page 6 of 10

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		$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY ***(Enter total on ITEM 15a of the Summary Sheet.)***		$ 0.00		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R17 / 8-23)
Indiana Election Division (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 7 of 10

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 C Dollary General 63 Southland Ctr Terre Haute IN 47802	Not for profit N/A	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Donations to Noon Optimist	$106.20	$106.20	03/29/2024
Code O Michelle Edwards 1010 Helen Avenue Terre Haute IN 47802	City Clerk City Clerk	☐ Direct ☐ In-Kind ☑ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Repay loan	$100.00	$100.00	06/20/2024
Code O Michelle Edwards 1010 Helen Avenue Terre Haute IN 47802	City Clerk City Clerk	☐ Direct ☐ In-Kind ☑ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Repay loan	$50.00	$150.00	06/23/2024
Code O Michelle Edwards 1010 Helen Avenue Terre Haute IN 47802	City Clerk City Clerk	☐ Direct ☐ In-Kind ☑ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Repay Loan	$25.00	$175.00	06/27/2024
Code O Michelle Edwards 1010 Helen Avenue Terre Haute IN 47802	City Clerk City Clerk	☐ Direct ☐ In-Kind ☑ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Repay Loan	$9.48	$184.48	06/27/2024
Code O Michelle Edwards 1010 Helen Avenue Terre Haute IN 47802	City Clerk City Clerk	☐ Direct ☐ In-Kind ☑ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: Repay loan	$50.00	$234.48	10/16/2024
Code 		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B			$ 340.68		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet.)*			$ 340.68		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R17 / 8-23)
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

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 _____		☐ 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:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
		SUBTOTAL THIS PAGE OF SCHEDULE C	$ 0.00		
		TOTAL OF ALL PAGES OF SCHEDULE C ON THE LAST PAGE ONLY ***(Enter total on ITEM 17a of the Summary Sheet.)***	$ 0.00		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R17 / 8-23)
Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE D) 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

Page 9 of 10

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 / NATURE OF DEBT	DATE DEBT INCURRED *(mm/dd/yy)*	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Michelle Edwards 1010 Helen Ave Terre Haute, IN 47802 LENDER'S OCCUPATION: City Clerk	Same	$200.00 Loan	02/09/2019	$200.00	$0.00
Michelle Edwards 1010 Helen Avenue Terre Haute, IN 47802 LENDER'S OCCUPATION: City Clerk	Same	$115.00 Loan	02/15/2019	$34.48	$80.52
Michelle Edwards 1010 Helen Avenue Terre Haute, IN 47802 LENDER'S OCCUPATION: City Clerk	Same	$200.00 Loan	02/19/2019	$0.00	$200.00
Michelle Edwards 1010 Helen Avenue Terre Haute, IN 47802 LENDER'S OCCUPATION: City Clerk	Same	$475.00 Loan	03/01/2019	$0.00	$475.00
Michelle Edwards 1010 Helen Avenue Terre Haute, IN 47802 LENDER'S OCCUPATION: City Clerk	Same	$300.00 Loan	03/15/2019	$0.00	$300.00
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
				SUBTOTAL THIS PAGE OF SCHEDULE D	$ 1,055.52
				TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY *(Enter total on ITEM 19 of the Summary Sheet.)*	$ 1,055.52

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R17 / 8-23)
Indiana Election Division (IC 3-9-5-14)

(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.

BORROWER'S NAME AND MAILING ADDRESS *(street, number, city, state, ZIP code)*	CO-SIGNER'S NAME AND MAILING ADDRESS *(if any)* *(street, number, city, state, ZIP code)*	ORIGINAL AMOUNT / NATURE OF DEBT	DATE DEBT INCURRED *(mm/dd/yy)*	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
SUBTOTAL THIS PAGE OF SCHEDULE E					$ 0.00
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY *(Enter total on ITEM 20 of the Summary Sheet.)*					$ 0.00