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

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.
Dan Kelly for Judge Committee

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

3. Committee Telephone Number
(812) 239-1088

4. Mailing Address *(Address where all campaign finance correspondence is received.)* ☐ Check if this is a new address.
~~2~~ 118 N. 3rd St.,

5. City, State, ZIP Code
Terre Haute, IN 47807

6. Party Affiliation *(if applicable)*
Republican

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

7. Full Name of Candidate *(Include any nickname.)*
Daniel Welch Kelly

8. Party Affiliation or if Independent Candidate
Republican

9. Office Sought *(Include district number, if any.* ***Not required for exploratory committee.****)*
Judge, Vigo Superior Court, Division 6

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

	COLUMN A This Period	COLUMN B Year to Date
12. Reporting Period *(mm/dd/yy)*: From: 01/01/2025 Through: 12/31/2025		
13. Cash on hand and investments at the beginning of this reporting period.	$363.12	
14. Cash on hand and investments January 1, current year.		$363.12
CONTRIBUTIONS AND RECEIPTS		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		
15a. Itemized *(Use Schedule A.)*	$0	$0
15b. Unitemized	$0	$0
15c. Add lines 15a and 15b in both columns. **SUBTOTAL**	$0	$0
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. **TOTAL**	$363.12	$363.12
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(Use Schedule B.) (Public Question: use Schedule C.)*	$0	$0
17b. Unitemized	$0	$0
17c. Add lines 17a and 17b in both columns. **SUBTOTAL**	$0	$0
18. Cash on hand and investments at close of this reporting period *(Subtract 17c from 16 in both columns.)* **TOTAL**	$363.12	$363.12
19. Debts OWED BY the committee *(Use Schedule D.)*	$15,293.56	
20. Debts OWED TO the committee *(Use Schedule E.)*	$0	

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)* 1/13/26
Signature of Candidate *(if applicable)* [signature]		Date *(mm/dd/yy)* 1/13/26

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
26 JAN 14 AM8:16:25

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(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 ________ of ________

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
Daniel W. Kelly 345 S. 22nd St. Terre Haute, IN 47803 LENDER'S OCCUPATION:				$0	$15,293.56
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
				SUBTOTAL THIS PAGE OF SCHEDULE D	**$15,293.56**