

FILED

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

(CFA-4)

OCT 16 2023

Summary Sheet

4606 (R17 / 8-23)

Indiana Election Division (IC 3-9-5-14)

FILE NUMBER

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.

CLERK CLARK CIRCUIT COURTS

TOTAL PAGES IN ENTIRE CFA-4 REPORT

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.

Friends of Buz Burns

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(502) 649-8744

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

Check if this is a new address.

2123 Veterans Pkwy

5. City, State, ZIP Code

Jeffersonville, IN 47130

6. Party Affiliation (if applicable)

Republican

CANDIDATE INFORMATION (For Candidate's Committees Only)

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

8. Party Affiliation or If Independent Candidate

William L. Burns, Jr. "Buz"

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

10. County of Residence

Jeffersonville City Council District 2

Craw

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. Check one:

Pre-Primary ☒ Pre-Election ☐ Annual ☐ Nomination ☐ Other ☐

Check one:

Pre-Convention ☐

Post-Convention ☐

Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)

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

From: 4/13/2023

Through: 10/12/2023

COLUMN A
This Period

COLUMN B
Year to Date

289.04

1539.04

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.)

15b. Unitemized

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

SUBTOTAL

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

TOTAL

EXPENDITURES

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

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

17b. Unitemized

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

SUBTOTAL

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

1539.04

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

20. Debts OWED TO the committee (Use Schedule E.)

CERTIFICATION

FOR OFFICE USE ONLY

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

Treasurer

Date (mm/dd/yy)

10/13/23

**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 _____ of _____

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. Building + Development Assoc. 4100 Charlestown Rd New Albany, IN 47150	Contributions: Direct In-Kind (describe) <i>check</i> Other Receipts: Interest Loan Miscellaneous (specify)	\$250 ⁰⁰	\$250 ⁰⁰	9/6/2023
2. Southern IN Realtors Assoc. RPAC 20 Lakeview Drive Clarksville, IN 47129	Contributions: Direct In-Kind (describe) <i>check</i> Other Receipts: Interest Loan Miscellaneous (specify)	\$1,000 ⁰⁰	\$1,000 ⁰⁰	9/27/2023
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	\$ 1,250 ⁻	
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)	\$ 1,250 ⁻	