



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4606 (R14 / 10-17)
Indiana Election Division (IC 3-9-5-14)

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

**(CFA-4)
Summary Sheet**

FILE NUMBER

10-2006-16

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION	
1. Full Name of Committee (as on Statement of Organization) Committee to Elect Dale Popp	<input type="checkbox"/> Check if this is a new name.
2. Acronym or Abbreviated Name (if any) n/a	3. Committee Telephone Number (812) 489-6340
4. Mailing Address (Address where all campaign finance correspondence is received.) 4 Virginia Drive	<input type="checkbox"/> Check if this is a new address.
5. City, State, ZIP Code Jeffersonville, IN 47130	6. Party Affiliation (if applicable) Democrat

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (Include any nickname.) Dale F. Popp	8. Party Affiliation or If Independent Candidate Democrat
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Jeffersonville Township Trustee	10. County of Residence Clark

TYPE OF REPORT	CONVENTION CANDIDATES ONLY	
11. Check one: <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other <input type="checkbox"/> Final / Disbands Committee (Lines 18, 19, and 20 must be "0.") <input type="checkbox"/> Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)	<input type="checkbox"/> Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention	

12. Reporting Period (mm/dd/yy): From: 1-1-16	Through: 12-31-16	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		0.00	
14. Cash on hand and investments January 1, current year.			0.00

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		0.00	
15b. Unitemized			
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	0.00	0.00

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		0.00	
17b. Unitemized			
17c. Add lines 17a and 17b in both columns.	SUBTOTAL	0.00	0.00
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	0.00	0.00
19. Debts OWED BY the committee (Use Schedule D.)		0.00	
20. Debts OWED TO the committee (Use Schedule E.)		0.00	

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
Jeffersonville Township Trustee

Date (mm/dd/yy)
1-5-18

Signature of Candidate (if applicable)

Date (mm/dd/yy)
1-5-18

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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2. Acronym or Abbreviated Name (if any) n/a	3. Committee Telephone Number (812) 489-6340
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7. Full Name of Candidate (Include any nickname.) Dale F. Popp	8. Party Affiliation or If Independent Candidate Democrat
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Jeffersonville Township Trustee	10. County of Residence Clark

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CONVENTION CANDIDATES ONLY

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12. Reporting Period (mm/dd/yy): From: 1-1-15 Through: 12-31-15	COLUMN A This Period	COLUMN B Year to Date
		0.00

13. Cash on hand and investments at the beginning of this reporting period.		0.00
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Signature of Treasurer

Title
Jeffersonville Township Trustee

Date (mm/dd/yy)
1-5-18

Signature of Candidate (if applicable)

Date (mm/dd/yy)
1-5-18

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**REPORT OF RECEIPTS AND EXPENDITURES
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State Form 4806 (R14 / 10-17)
Indiana Election Division (IC 3-9-5-14)

**(CFA-4)
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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)
Dale F. Popp		1-5-18
Signature of Candidate (if applicable)		Date (mm/dd/yy)
Dale F. Popp		1-5-18

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