



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19)
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.

Committee to Elect Jennifer Voignier

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(812) 426-7892

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

954 Parkwood Dr.

5. City, State, ZIP Code

Clarksville, IN 47129

6. Party Affiliation (if applicable)

Republican

CANDIDATE INFORMATION (For Candidate's Committees Only)

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

Jennifer Voignier

8. Party Affiliation or If Independent Candidate

Republican

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

Clarksville Town Council At-Large

10. County of Residence

Clark

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: 10-14-2023

Through: 12-31-2023

COLUMN A
This Period

COLUMN B
Year to Date

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

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

Corrie Voignier

Title

Treasurer

Date (mm/dd/yy)

1-15-24

Signature of Candidate (if applicable)

Date (mm/dd/yy)

1-15-24

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)

FILED

JAN 17 2024

Ryan Lynch

CLERK CLARK CIRCUIT COURTS



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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 related to 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

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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 Jerry Voignier 1539 Briarwood Dr Clarksville, IN 47129 Contributor's Occupation (if required)	Contributions ☒ Direct ☐ In-Kind (describe) _____ Other Receipts ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	\$450.00	\$450.00 1	10-19-2023	Jennifer Voignier
2 Misc. Cash Contributor's Occupation (if required)	Contributions ☒ Direct ☐ In-Kind (describe) _____ Other Receipts ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	\$95.00	\$545.00	10-15-2023	Jennifer Voignier
3 Jennifer Voignier 954 Parkwood Dr. Clarksville, IN 47129 Contributor's Occupation (if required)	Contributions ☒ Direct ☐ In-Kind (describe) _____ Other Receipts ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	\$720.02	\$1265.02	12-31-2023	Jennifer Voignier
4 Jerry Voignier 1539 Briarwood Dr Clarksville, IN 47129 Contributor's Occupation (if required)	Contributions ☐ Direct ☒ In-Kind (describe) stamps Other Receipts ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	\$51.00	\$1316.02	10-20-2023	Jennifer Voignier
5 Contributor's Occupation (if required)	Contributions ☐ Direct ☐ In-Kind (describe) _____ Other Receipts ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____				
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 1316.02			
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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(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

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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/yyyy)
Code <u>A</u> VistaPrint.com	Printing Company	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose _____	229.29	229.29	10/14/2022
Code <u>A</u> VistaPrint.com	Printing Company	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose _____	181.15	410.44	10/14/2022
Code <u>A</u> VistaPrint.com	Printing Company	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose _____	187.71	598.15	10/20/2023
Code <u>D</u> USPS	Stamps	☐ Direct ☒ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose _____	51.00	649.15	10/20/2023
Code _____ Jennifer Voiguer 554 Parkwood Dr Clarksville, TN 37129	Chief Business Officer	☐ Direct ☐ In-Kind ☒ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose _____	666.87	736.02	12/31/2023
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			<u>5/316.02</u>		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			<u>5/316.02</u>		