

State Form 4606 (R15 / 5-19) 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

## (CFA-4) **Summary Sheet**

FILE NUMBER

**TOTAL PAGES IN ENTIRE CFA-4 REPORT** 

1

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)  MULL FOR PROSECUTOR  Check if this is a new in the committee of	name.		
2. Acronym or Abbreviated Name (if any)	3. Com	mittee Telephone Number	
	(	)	
4. Mailing Address (Address where all campaign finance correspondence is received.) 3708 ALVIN DR	Check if th	nis is a new address.	
5. City, State, ZIP Code		Affiliation (if applicable)	
JEFFERSONVILLE, IN 47130	30.00	UBLICAN	
CANDIDATE INFORMATION (For Candidate's C			
7. Full Name of Candidate (Include any nickname.) JEREMY MULL		y Affiliation or If Independen UBLICAN	nt Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.) CLARK COUNTY PROSECUTING ATTORNEY	10. Cou	unty of Residence RK	
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conv	ention
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend State	tement of Org	nanization.) Dost-Con	vention
12. Reporting Period (mm/dd/yy): From: 10/15/22 Through: 12/31/22		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		356.09	
14. Cash on hand and investments January 1, current year.			356.09
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			0
15a. Itemized (Use Schedule A.)		0	0
15b. Unitemized		0	0
	TOTAL	0	
	TOTAL	0	0
(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
III. A STATE OF THE STATE OF TH	TOTAL	0	0
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	356.09	356.09
19. Debts OWED BY the committee (Use Schedule D.)		0	200.00
20. Debts OWED TO the committee (Use Schedule E.)		0	

	CERTIFICATION	STATE OF THE PARTY AND ADDRESS.
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT.	TO THE BEST OF MY KNOWLEDGE AND BELIEF IT I	S TRUE, CORRECT AND COMPLETE.
Signature of Treasure	Title TREASURER	Date (mm/dd/yy) 01/05/2023
Signature of Candidate (If applicable)		Date (mm/dd/yy) 01/05/2023
WARNING: Any intermetion contained in this report may no	of he conied for cale or used for any commercial number	se //C 3-0-4-5) A nerson 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







State Form 4606 (R15 / 5-19) 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?

Signature of Treasurer

Signature of Candidate (if applicable)

Yes

No

## (CFA-4) **Summary Sheet**

**FILE NUMBER** 

**TOTAL PAGES IN ENTIRE CFA-4 REPORT** 

1

Date (mm/dd/yy)

10/18/22

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)  Check if this is a new remarkable of Drawn of Check if this is a new remarkable of Check if the Check if	name.		
2. Acronym or Abbreviated Name (if any)	3. Committe	e Telephone Number	
	(	)	
4. Mailing Address (Address where all campaign finance correspondence is received.)  3708 ALVIN DR	Check if this is	a new address.	
5. City, State, ZIP Code JEFFERSONVILLE, IN 47130	6. Party Affil REPUBI	liation <i>(if applicable)</i> LICAN	
CANDIDATE INFORMATION (For Candidate's C	ommittees (	Only)	
7. Full Name of Candidate (Include any nickname.)	8. Party Affil	liation or If Independent	Candidate
JEREMY MULL	REPUB	LICAN	
9. Office Sought (Include district number, if any. Not required for exploratory committee.) CLARK COUNTY PROSECUTING ATTORNEY	10. County of CLARK	of Residence	
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	
☐ Pre-Primary  Pre-Election ☐ Annual ☐ Nomination ☐ Other		Pre-Conve	ntion
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend State	ement of Organizati	ion.) Dost-Conve	ention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: 4/09/22 Through: 10/14/22		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		356.09	
14. Cash on hand and investments January 1, current year.			356.09
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.	TOTAL	0	0
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	0	0
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.	TOTAL	0	0
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	356.09	356.09
19. Debts OWED BY the committee (Use Schedule D.)		0	
20. Debts OWED TO the committee (Use Schedule E.)		0	
CERTIFICATION			P OFFICE LISE ONLY

Date (mm/dd/yy) 10/18/22 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)

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE,

**TREASURER** 



State Form 4606 (R15 / 5-19) 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

**TOTAL PAGES IN ENTIRE CFA-4 REPORT** 

1

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)  Check if this is a new MULL FOR PROSECUTOR	name.		
2. Acronym or Abbreviated Name (if any)	3. Comm	nittee Telephone Number	
	(	)	
4. Mailing Address (Address where all campaign finance correspondence is received.)  3708 ALVIN DR.	Check if this	s is a new address.	
5. City, State, ZIP Code		Affiliation (if applicable)	
JEFFERSONVILLE, IN 47130	REPU	JBLICAN	
CANDIDATE INFORMATION (For Candidate's	Committee	es Only)	James Co.
7. Full Name of Candidate (Include any nickname.)		Affiliation or If Independer	nt Candidate
JEREMY MULL	REPL	JBLICAN	
Office Sought (Include district number, if any. Not required for exploratory committee.)     CLARK COUNTY PROSECUTING ATTORNEY	10. Coun	nty of Residence	
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
✓ Pre-Primary ☐ Pre-Election ☐ Annual ☐ Nomination ☐ Other		Pre-Conv	rention
Final / Disbands Committee (Lines 18, 19, and 20 must be *0".) Outgoing Treasurer (Within ten (10) days amend St.	atement of Organ	nization.) Dost-Con	vention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: 1/1/22 Through: 4/8/22		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		356.09	
14. Cash on hand and investments January 1, current year.			356.09
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		0.00	C
15b. Unitemized		0	0
15c. Add lines 15a and 15b in both columns.	TOTAL	0	0
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	0	0
EXPENDITURES	No. of Street, or other party of the street, or other party or other party of the street, or other party or oth		
(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	Ď
17c. Add lines 17a and 17b in both columns.	BTOTAL	Ö	Ö
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	356.09	356.09
19. Debts OWED BY the committee (Use Schedule D.)		Ω	33 4.01
20. Debts OWED TO the committee (Use Schedule E.)		0	
CERTIFICATION		F	OR 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 Date (mm/dd/yy) **TREASURER** 4/18/22 Signature of Candidate (if applicable) Date (mm/dd/yy) 4/18/22

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)



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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IS THIS AN AMENDMENT? ☐ Yes ✓ No.

## (CFA-4) Summary Sheet

FILE NUMBER

**TOTAL PAGES IN ENTIRE CFA-4 REPORT** 

1

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)  MULL FOR PROSECUTOR  Check if this is a new	v name.		
2. Acronym or Abbreviated Name (if any)	3. Com	mittee Telephone Number	
_	[	)	
4. Mailing Address (Address where all campaign finance correspondence is received.) 3708 ALVIN DR.	Check if th	is is a new address.	
5. City, State, ZIP Code		Affiliation (if applicable)	
JEFFERSONVILLE, IN 47130		UBLICAN	
CANDIDATE INFORMATION (For Candidate's	Committe	ees Only)	
7. Full Name of Candidate (Include any nickname.) JEREMY MULL		Affiliation or If Independent UBLICAN	Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.) CLARK COUNTY PROSECUTING ATTORNEY	10. Cou CLAI	inty of Residence RK	
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary ☐ Pre-Election ✓ Annual ☐ Nomination ☐ Other		Pre-Conve	ntion
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend S	tatement of Org	anization.) Dost-Conve	ention
12. Reporting Period (mm/dd/yy):		COLUMN A	COLUMN B
From: 1/1/2021 Through: 12/31/21		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		356.09	
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.)		0.00	0.00
15b. Unitemized		0.00	0.00
15c. Add lines 15a and 15b in both columns.	BTOTAL	0.00	0.00
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.)		0.00	0.00
17b. Unitemized		0.00	0.00
17c. Add lines 17a and 17b in both columns.	BTOTAL	0.00	0.00
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	356.09	
19. Debts OWED BY the committee (Use Schedule D.)		0.00	
20. Debts OWED TO the committee (Use Schedule E.)		0.00	

CER	TIFICATION	
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES	ST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CO	ORRECT AND COMPLETE.
Signature of Treasure	Title TREASURER	Date (mm/dd/yy) 01/04/2021
Signature of Carididate of applicable)		Date (mm/dd/yy) 01/04/2021
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

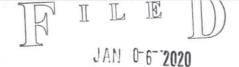
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the indiana Campaign 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



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State Form 4606 (R15 / 5-19)

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

✓ No

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

(CFA-4) ச்சூSummary Sheet

**FILE NUMBER TOTAL PAGES IN ENTIRE CFA-4 REPORT** 

COMMITTEE INCOMM	ATION			
COMMITTEE INFORMA				
1. Full Name of Committee (as on Statement of Organization)  MULL FOR PROSECUTOR	s a new name	э.		
2. Acronym or Abbreviated Name (if any)	3.	Committee Telep	phone Number	
	(	)		
4. Mailing Address (Address where all campaign finance correspondence is received.) 3708 ALVIN DR.	Chec	k if this is a new a	address.	
5. City, State, ZIP Code JEFFERSONVILLE, IN 47130	200	Party Affiliation (		
CANDIDATE INFORMATION (For Candid				
7. Full Name of Candidate (Include any nickname.)			or If Independent	Candidate
JEREMY MULL		REPUBLICA		Curialidate
9. Office Sought (Include district number, if any. Not required for exploratory committee CLARK COUNTY PROSECUTING ATTORNEY		. County of Resid	dence	
TYPE OF REPORT	15 14		CONVENTION	CANDIDATES ONLY
11. Check one:		Ĭ	Check one:	
Pre-Primary ☐ Pre-Election ✔ Annual ☐ Nomination ☐ Other			☐ Pre-Conver	ntion
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days	amend Statement	t of Organization.)	Post-Conve	ention
12. Reporting Period (mm/dd/yy):		COL	UMN A	COLUMN B
From: 1/1/2020 Through: 12/31/20		This	Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			356.09	
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 contribution	ns.)			
15a. Itemized (Use Schedule A.)			0.00	0.00
15b. Unitemized	11 11 11 11 11 11 11 11 11 11 11 11 11		0.00	0.00
15c. Add lines 15a and 15b in both columns.	SUBTOTA	AL	0.00	0.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	тот	AL		
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			0.00	0.00
17b. Unitemized			0.00	0.00
17c. Add lines 17a and 17b in both columns.	SUBTOT	AL	0.00	0.00
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both column	mns.) TO	TAL	356.09	0.00
19. Debts OWED BY the committee (Use Schedule D.)			0.00	
20. Debts OWED TO the committee (Use Schedule E.)			0.00	

CER	TIFICATION	
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES	T OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CO	ORRECT AND COMPLETE.
Signature of Treasurer	Title TREASURER	Date (mm/dd/yy) 01/06/2021
Signature of Oandidate (if applicable)		Date (mm/dd/yy) 01/06/2021
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



#### REPORT OF RECEIPTS AND EXPENDITURES 07: 0900-A100 BACIN OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4) Summary Sheet

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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

**TOTAL PAGES IN ENTIRE CFA-4 REPORT** 

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COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)	The second second		
Mull for Prosecutor			
2. Acronym or Abbreviated Name (if any)	3. Com	nmittee Telephone Number	
5 3240	(	)	
4. Mailing Address (address where all campaign finance correspondence is received) 3708 Alvin Drive	Check if th	is is a new address	
5. City, State, ZIP Code	6. Part	y Affiliation (if applicable)	
Jeffersonville, IN 47130	Rep	ublican	
CANDIDATE INFORMATION (For Candidate's	Committe	ees Only)	
7. Full Name of Candidate (include any nickname)	8. Part	y Affiliation or If Independent	Candidate
Jeremy Mull	Rep	ublican	
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Clark County Prosecuting Attorney	10. Cor Clar	unty of Residence k	
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	
☐ Pre-Primary ☐ Pre-Election ☑ Annual ☐ Nomination ☐ Other		Pre-Conve	ntion
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Utgoing Treasurer (within 10 days amend Statement	of Organization	n) Post-Conve	ention
12. Reporting Period:		COLUMN A	COLUMN B
From: 1/1/2019 Through: 12/31/2019		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		356.09	
14. Cash on hand and investments January 1, current year.		<b>企业是实现</b> 发展。	
CONTRIBUTIONS AND RECEIPTS	大块人类的		
(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	TOTAL	0.00	0.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	356.09	0.00
EXPENDITURES			A STATE OF
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		0.00	0.00
17b. Unitemized		0.00	0.00
17c. Add lines 17a and 17b in both columns	BTOTAL	0.00	0.00
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	356.09	0.00
19. Debts OWED BY the committee (use Schedule D)		0.00	
20. Debts OWED TO the committee (use Schedule E)		0.00	是認知。語言認為
CERTIFICATION	1 4 7 7 8 1	Ent	R OFFICE USE ONLY
CERTIFICATION  I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TO	TRUE, CORE		. S. III
Signature of Treasurer A / Title		ate Late	

CER	TIFICATION	
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES	ST OF MY KNOWLEDGE AND BELIEF I	T IS TRUE, CORRECT AND COMPLETE.
Signature of Treasurer	Title Treasurer	Date 01/08/2020
Signature of Candidate (if applicable)		Date 01/08/2020

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 Class D 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) CLERK CLARK CIRCUIT COURTS

JAN 68 2020



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

16-01-19A08:45 RES

(CFA-4) **Summary Sheet** 

FILE NUMBER
TOTAL PAGES IN ENTIRE CFA-4 REPORT
1

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			1	
	COMMITTEE INFORMATION	N			
1. Full Name of Committee (as on Statement of Organization	n) Check if this is a new	w name			
Mull for Prosecutor					
2. Acronym or Abbreviated Name (if any)		3. Committee Telephone Number			
		(	)		
4. Mailing Address (address where all campaign finance con PO Box 188	rrespondence is received)	Check if thi	s is a new address		
5. City, State, ZIP Code		6. Party Affiliation (if applicable)			
Jeffersonville, IN 47130		Republican			
CANDIDATE INF	ORMATION (For Candidate's	Committe	ees Only)		
7. Full Name of Candidate (include any nickname)		8. Party Affiliation or If Independent Candidate			Candidate
Jeremy Mull		Repu	Republican		
<ol> <li>Office Sought (Include district number, if any. Not require Clark County Prosecuting Attorney</li> </ol>	ed for exploratory committee.)	The state of the s	10. County of Residence Clark		
TYPE OF F	REPORT		CONVEN	ITION	CANDIDATES ONLY
11. Check one:			Check or	ne:	
☐ Pre-Primary ☐ Pre-Election ✓ Annual ☐ Nomination ☐ Other			Pre-Convention		
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgo	oing Treasurer (within 10 days amend Statemen	nt of Organization	n) Dost	-Conve	ention
12. Reporting Period:			COLUMN A		COLUMN B
From: 10/13/2018 Through	<sub>gh:</sub> 12/31/2018		This Period		Year to Date
13. Cash on hand and investments at the beginning of this r	reporting period.		356.	09	
14. Cash on hand and investments January 1, current year.					
CONTRIBUTIONS AND					
(Note: these amounts include in-kind contributions and loan	s, as well as cash contributions.)				
15a. Itemized (use Schedule A)				00	0.00
15b. Unitemized				00	0.00
15c. Add lines 15a and 15b in both columns	and the state of t	BTOTAL	0.00		0.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c	and the same and t	TOTAL	356.	09	0.00
EXPENDITURE					
(Note: These amounts include in-kind expenditures and loar	50.00 M				
17a. Itemized (use Schedule B) (Public Question: use Schedule B)	dule C)			00	0.00
17b. Unitemized			0.	00	0.00
17c. Add lines 17a and 17b in both columns		SUBTOTAL 0.00		00	0.00
18. Cash on hand and investments at close of this reporting period (s	subtract 17c from 16 in both columns)	TOTAL	356.	09	0.00
19. Debts OWED BY the committee (use Schedule D)			0.	00	
20. Debts OWED TO the committee (use Schedule E)			0.0	00	
CER	TIFICATION			FOF	R OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES		TRUE, CORF	RECT AND COMPLETE.	1	The solution of the solution o
Signature of Treasurer	Title Treasurer	700	Oate 01/15/2019		

01/15/2019 Signature of Candidate (if applicable) 01/15/2019

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 Class D 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)



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

OCT 19 2018

(CFA-4) **Summary Sheet** 

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TOTAL PAGES IN ENTIRE CFA-4 REPORT

assistance in completing this form, see instructions on the reverse side.		
	CLERK CLARK CIE	ICUIT CC

IS THIS AN AMENDMENT?  Yes  No			1	
COMMITTEE IN	FORMATION			
	k if this is a new nan	ne		
Mull for Prosecutor	in the load flow flam			
2. Acronym or Abbreviated Name (if any)	3	. Committee	Telephone Number	
90 SSM	(	)	*(0.00000	
4. Mailing Address (address where all campaign finance correspondence is received PO Box 188	ived)	k if this is a no	ew address	
5. City, State, ZIP Code Jeffersonville, IN 47130		6. Party Affiliation (if applicable) Republican		
CANDIDATE INFORMATION (For	Candidate's Con	nmittees On	ly)	
7. Full Name of Candidate (include any nickname)	8	. Party Affiliati	ion or If Independent	Candidate
Jeremy Mull		Republican		
9. Office Sought (Include district number, if any. Not required for exploratory con Clark County Prosecuting Attorney		10. County of Residence Clark		
TYPE OF REPORT	HARRIE		CONVENTION	CANDIDATES ONLY
11. Check one:			Check one:	
Pre-Primary ✓ Pre-Election ☐ Annual ☐ Nomination ☐ Other		Pre-Convention		ntion
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 day	ys amend Statement of Org	anization)	☐ Post-Conve	ention
12. Reporting Period: From: 04/14/2018 Through: 10/12/2018				COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			356.09	
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 con	ntributions.)			
15a. Itemized (use Schedule A)			0.00	0.00
15b. Unitemized			0.00	0.00
15c. Add lines 15a and 15b in both columns	SUBTOT	AL	0.00	0.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	тот	AL	356.09	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	0.00
17b. Unitemized			0.00	0.00
17c. Add lines 17a and 17b in both columns	SUBTO	ΓAL	0.00	0.00
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in b	oth columns) TO	TAL	356.09	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			FO.	B OFFICE HEE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE A	AND BELIEF IT IS TRUE	CORRECT AN		R OFFICE USE ONLY
Signature of Treasurer		Date	/18/18	

10/18/18 reasurer Signature of Canadate (if applicable) Date 10/18/18

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