REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

F I L E D

OCT 19 2018

Susan Popp

(CFA-4)
Summary Sheet
FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

3

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

Friends of John Durbn

2. Acronym or Abbreviated Name *(if any)*	3. Committee Telephone Number (502)345-9555

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

8505 Eagle Trail

5. City, State, ZIP Code Charlestown In 47111	6. Party Affiliation *(if applicable)* Republican

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

7. Full Name of Candidate *(include any nickname)* John T Durbin	8. Party Affiliation or If Independent Candidate Republican
9. Office Sought *(Include district number, if any.* **Not required for exploratory committee.)** Utica Township Trustee	10. County of Residence Clark

TYPE OF REPORT | CONVENTION CANDIDATES ONLY

11. Check one:

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

☐ Final/Disbands Committee (lines 18, 19, and 20 must be "0") ☐ Outgoing Treasurer *(within 10 days amend Statement of Organization)*

Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting Period:		COLUMN A This Period	COLUMN B Year to Date
From: Through:			
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.)

		COLUMN A	COLUMN B
15a. Itemized (use Schedule A)		205,00	205.00
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	0.00 205.00	0.00 205.00

EXPENDITURES

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

		COLUMN A	COLUMN B
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		205.00	205.00
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	0.00 0.00	0.00
19. Debts OWED BY the committee (use Schedule D)		-0-	
20. Debts OWED TO the committee (use Schedule E)		-0-	

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	Date

Signature of Candidate *(if applicable)*		Date 10/19/2018

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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 totaled on 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.

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 / RECEIVED BY
1. John Duebin (Candidate) 8505 Eagle Trail Charlestown IN 47111 Contributor's Occupation *(if required)* ___	Contributions: ☒ Direct ☐ In-Kind *(describe)* — Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	$205 00	$205 00	10-2-18 Candidate
2. Contributor's Occupation *(if required)* ___	Contributions: ☐ Direct ☐ In-Kind *(describe)* — Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*			
3. Contributor's Occupation *(if required)* ___	Contributions: ☐ Direct ☐ In-Kind *(describe)* — Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*			
4. Contributor's Occupation *(if required)* ___	Contributions: ☐ Direct ☐ In-Kind *(describe)* — Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*			
5. Contributor's Occupation *(if required)* ___	Contributions: ☐ Direct ☐ In-Kind *(describe)* — Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*			

SUBTOTAL THIS PAGE OF SCHEDULE A	$ 205 00
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet)*	$ 205.00

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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.

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
Code ____ SAMPAN Utica Indiana		☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose: YARD Signs			205⁰⁰
Code ____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:			
Code ____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:			
Code ____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:			
Code ____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:			
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	$ 205⁰⁰
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet)*	$ 205⁰⁰