



**SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT BY
A CANDIDATE'S COMMITTEE
(\$1,000 CONTRIBUTIONS OR MORE)**

State Form 48492 (R6 / 5-19)
Indiana Election Division (IC 3-9-5-20 1, 3-9-5-22)

(CFA-11)

INSTRUCTIONS: Only candidates receiving a "large contribution" are required to file this report. 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 Candidate (Include any nickname) Check if this is a new name 2 Committee Telephone Number
Ryan Lynch (502) 819-1467

3. Mailing Address (Address where all campaign finance correspondence is received) Check if this is a new address
P O Box 3103

4 City Clarksville State IN ZIP Code 47131 5 Party Affiliation or If Independent Candidate
Republican

6. Office Sought (Include district number, if any. Not required for exploratory committee.) 7 County of Residence
County Clerk of Courts Clark

8. Reporting Period (mm/dd/yy):
From 10/15/22 Through 11/6/22

For classification, enter INDV for individual, PAC for political action committee, CORP for corporation, LAB for labor organization, OTHER for all entries which are not one of the above categories

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)		TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED (mm/dd/yy) RECEIVED BY
Classification OTHER	1. Clark County Republican Party P O Box 952 Jeffersonville, IN	Contributions <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) <u>media services</u> Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____ Contributor's Occupation (if applicable) _____	\$5,000.00	10/28/2022 Sampan
Classification	2.	Contributions <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____ Contributor's Occupation (if applicable) _____		
Classification	3	Contributions <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____ Contributor's Occupation (if applicable) _____		

CERTIFICATION

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

Ryan E Lynch

Title

Candidate

Date (mm/dd/yy)

11/1/2022

Signature of Candidate (if applicable)

Ryan E Lynch

Date (mm/dd/yy)

11/1/2022

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, and IC 3-9-4-18).

FOR OFFICE USE ONLY

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CLERK CLARK CIRCUIT COURTS
Nov 01 2022 *D*

Shawn Dopp