



**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

FILE NUMBER

**TOTAL PAGES IN ENTIRE CFA-11
REPORT**

1

COMMITTEE INFORMATION

1. Full Name of Candidate (Include any nickname) <input type="checkbox"/> Check if this is a new name Ryan Lynch			2. Committee Telephone Number (502) 819-1467	
3. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> 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.) Clerk of Courts			7. County of Residence Clark	
8. Reporting Period (mm/dd/yy). From 10/15/2022 Through 11/6/2022				

For classification, enter INDV for individual, PAC for political action committee, CORP for corporation, LAB for labor organization, OTHER for all entities 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. Friends of Scottie Maples 3605 Flagstaff Dr Jeffersonville, IN 47130 Contributor's Occupation (if applicable) _____	Contributions <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) Mailing Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$2,500.00	11/2/2022 Sampan
Classification OTHER	2. Friends of Zach Payne 957 Main St Charlestown, IN 47111 Contributor's Occupation (if applicable) _____	Contributions <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) Mailing Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$1,149.16	11/2/2022 Vistaprint/USPS
Classification OTHER	3. Friends of Zach Payne 957 Main St Charlestown, IN 47111 Contributor's Occupation (if applicable) _____	Contributions <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) PRINT Other Receipts <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	\$347.55	11/1/2022 BannerBuzz

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 	Title Candidate	Date (mm/dd/yy) 11/2/22
Signature of Candidate (if applicable) 		Date (mm/dd/yy) 11/2/22

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

FOR OFFICE USE ONLY

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CLERK CLARK CIRCUIT COURTS
NOV 02 2022