



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

(CFA-11)

State Form 48492 (R6 / 5-19)
Indiana Election Division (IC 3-9-5-20.1; 3-9-5-22)

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.)		<input type="checkbox"/> Check if this is a new name.		2. Committee Telephone Number
<i>Scott Allen Hawkins</i>				(802) 548-9129
3. Mailing Address (Address where all campaign finance correspondence is received.)				<input type="checkbox"/> Check if this is a new address.
<i>3415 Gardner Dr</i>				
4. City	State	ZIP Code	5. Party Affiliation or If Independent Candidate	
<i>Jeff</i>	<i>IN</i>	<i>47130</i>	<i>Republican</i>	
6. Office Sought (Include district number, if any. Not required for exploratory committee.)			7. County of Residence	
<i>Jeffersonville City Council At-large</i>			<i>Clark</i>	
8. Reporting Period (mm/dd/yy): From: <i>10/18/23</i> Through: <i>11/15/23</i>				

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.

Classification	1.	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	
		<i>Local 558 Jeff firefighters PAC 700 E. 11th St Jeff IN 47130</i>	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify) _____	<i>1500.-</i>	<i>10/23/23</i> <i>Scott Hawkins</i>
	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) _____		
	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

Scott Hawkins

Title

Treasurer/Candidate

Date (mm/dd/yy)

10/23/23

Signature of Candidate (if applicable)

Scott Hawkins

Date (mm/dd/yy)

10/23/23

FOR OFFICE USE ONLY

FILED

OCT 23 2023

Ryan Lynch
CLERK CLARK CIRCUIT COURTS

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)