



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)	<input type="checkbox"/> Check if this is a new name.		
Clark County Democratic Party			
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number ()		
4. Mailing Address (Address where all campaign finance correspondence is received.)	<input type="checkbox"/> Check if this is a new address.		
5. City, State, ZIP Code	6. Party Affiliation (if applicable)		
CANDIDATE INFORMATION (For Candidate's Committees Only)			
7. Full Name of Candidate (Include any nickname.)	8. Party Affiliation or If Independent Candidate		
Sharon Smith Neal	Democrats		
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence		
Brecon Township Trustee	Clark		
TYPE OF REPORT		CONVENTION CANDIDATES ONLY	
11. Check one:	<input type="checkbox"/> Check one:		
<input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other _____	<input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention		
<input checked="" type="checkbox"/> Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) <input type="checkbox"/> Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)			
12. Reporting Period (mm/dd/yy): From: Oct 1 2022 Through: Nov 8 2022	COLUMN A This Period		COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	0		0
14. Cash on hand and investments January 1, current year.			0
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)	200.00		
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		
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			
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		
19. Debts OWED BY the committee (Use Schedule D.)			
20. Debts OWED TO the committee (Use Schedule E.)			

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

Date (mm/dd/yy)

I L E

CLERK CLARK CIRCUIT COURTS

Signature of Candidate (if applicable)

Sharon Neal

Date (mm/dd/yy)

01/13/2022

JAN 13 2023

D

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
OF A POLITICAL COMMITTEE**

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

**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

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.

FILE NUMBER

Page _____ of _____

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 (mm/dd/yy)
		RECEIVED BY		
1. Clark County Democratic Alliance	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <hr/> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p> <hr/>	200.00		Oct. 2022
2.	<p>Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <hr/> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p> <hr/>			
3.	<p>Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <hr/> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p> <hr/>			
4.	<p>Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <hr/> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p> <hr/>			
5.	<p>Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <hr/> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p> <hr/>			
Contributor's Occupation (if required)				
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 200.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$		



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(CFA-4 SCHEDULE A-2)
CONTRIBUTIONS BY CORPORATIONS
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS 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 corporations 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).

FILE NUMBER

Page _____ of _____

CONTRIBUTOR'S FULL NAME AND 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 (mm/dd/yy) RECEIVED BY
1. <i>Budget Print Jeffersonville, IN</i>	<p>Contributions:</p> <p><input checked="" type="checkbox"/> Direct</p> <p><input type="checkbox"/> In-Kind (describe)</p> <hr/> <p>Other Receipts:</p> <p><input type="checkbox"/> Interest <input type="checkbox"/> Loan</p> <p><input type="checkbox"/> Miscellaneous (specify)</p> <hr/>	<i>38.10</i>		
2. <i>Budget Print Jeffersonville</i>	<p>Contributions:</p> <p><input type="checkbox"/> Direct</p> <p><input type="checkbox"/> In-Kind (describe)</p> <hr/> <p>Other Receipts:</p> <p><input type="checkbox"/> Interest <input type="checkbox"/> Loan</p> <p><input type="checkbox"/> Miscellaneous (specify)</p> <hr/>	<i>203.30</i>		<i>10-25-22</i>
3.	<p>Contributions:</p> <p><input type="checkbox"/> Direct</p> <p><input type="checkbox"/> In-Kind (describe)</p> <hr/> <p>Other Receipts:</p> <p><input type="checkbox"/> Interest <input type="checkbox"/> Loan</p> <p><input type="checkbox"/> Miscellaneous (specify)</p> <hr/>			
4.	<p>Contributions:</p> <p><input type="checkbox"/> Direct</p> <p><input type="checkbox"/> In-Kind (describe)</p> <hr/> <p>Other Receipts:</p> <p><input type="checkbox"/> Interest <input type="checkbox"/> Loan</p> <p><input type="checkbox"/> Miscellaneous (specify)</p> <hr/>			
5.	<p>Contributions:</p> <p><input type="checkbox"/> Direct</p> <p><input type="checkbox"/> In-Kind (describe)</p> <hr/> <p>Other Receipts:</p> <p><input type="checkbox"/> Interest <input type="checkbox"/> Loan</p> <p><input type="checkbox"/> Miscellaneous (specify)</p> <hr/>			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ <i>203.30</i>		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$		