

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R14 / 10-17) 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 NOV 1 4 2017 (CFA-4) 11:11 am

Summary Sheet

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	F	ILE	NUMBER		1111	
OTAL	PAGES	IN	ENTIRE CF	A-4	REPOR	Г

COMMITTEE INFOR	MATION			
1. Full Name of Committee (as on Statement of Organization)	nis is a new nam	e.		
Friends of Zach Payne				
2. Acronym or Abbreviated Name (if any)	3.	Committee Tele	phone Number	
	(812) 841	1-5473	
4. Mailing Address (Address where all campaign finance correspondence is received.)	k if this is a new	address.	
957 Main Street				
5. City, State, ZIP Code	7.5	Party Affiliation	(if applicable)	
Charlestown, Indiana, 47111		Republican		
CANDIDATE INFORMATION (For Can				
7. Full Name of Candidate (Include any nickname.)			or If Independent	Candidate
Zachary Charles Payne		Republican		
9. Office Sought (Include district number, if any. Not required for exploratory comm		0. County of Resi Clark	idence	
Recorder		Slark	CONVENTION	CANDIDATES ONLY
TYPE OF REPORT			Check one:	CANDIDATES ONET
11. Check one: Pre-Primary Pre-Election Annual Nomination Other			Pre-Conver	ntion
Final / Disbands Committee (Lines 18, 19, and 20 must be "0") Outgoing Treasurer (Within ten (10))	days amond Statemer	at of Organization 1	Post-Conve	
	uays ameno statemer			
12. Reporting Period (mm/dd/yy): From: 01/01/2017 Through: 11/13/2017			LUMN A s Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			0.00	
Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments January 1, current year.			0.00	0.00
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions	utions.)			
15a. Itemized (Use Schedule A.)			0.00	0.00
15b. Unitemized			0.00	0.00
15c. Add lines 15a and 15b in both columns.	SUBTOT	AL	0.00	0.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOT	AL	0.00	0.00
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)			NAME OF STREET	
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			0.00	0.00
17b. Unitemized			0.00	0.00
17c. Add lines 17a and 17b in both columns.	SUBTO	ΓAL	0.00	0.00
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both of	columns.) TC	TAL	0.00	0.00
19. Debts OWED BY the committee (Use Schedule D.)			0.00	
20. Debts OWED TO the committee (Use Schedule E.)			0.00	
CERTIFICATION			FO	R OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND I	BELIEF IT IS TRUE	, CORRECT AND C	OMPLETE.	

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 Treasurer/Candidate	Date (mm/dd/yy) 11/13/2017		
Signature of Candidate (if applicable) Date (mm/dd/yy) 11/13/2017				
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)



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(CFA-4)

Summary Sneet
FILE NUMBER
TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORM	ATION			
	is a new name.			
Friends of Zach Payne				
2. Acronym or Abbreviated Name (if any)	ephone Number			
4. Mailing Address (Address where all campaign finance correspondence is received.) 957 Main Street	Check if	this is a nev	v address.	
5. City, State, ZIP Code Charlestown, Indiana, 47111		rty Affiliation oublican	(if applicable)	
CANDIDATE INFORMATION (For Candid	date's Commi	ttees Only)		
7. Full Name of Candidate (Include any nickname.)	8. Pa	rty Affiliation	or If Independent	Candidate
Zachary Charles Payne		publican		
 Office Sought (Include district number, if any. Not required for exploratory committee Recorder 				
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 ten (10) days	amend Statement of 0	Organization.)	Check one: Pre-Conve	ention
12. Reporting Period (mm/dd/yy): From: 01/01/2016 Through: 12/31/2016			LUMN A s Period	COLUMN B Year to Date
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				κ ,
(Note: these amounts include in-kind contributions and loans, as well as cash contribution	ns.)			
15a. Itemized (Use Schedule A.)			0.00	0.00
15b. Unitemized			0.00	0.00
15c. Add lines 15a and 15b in both columns.	SUBTOTAL		0.00	0.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL		0.00	0.00
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			0.00	0.00
17b. Unitemized			0.00	0.00
17c. Add lines 17a and 17b in both columns.	SUBTOTAL		0.00	0.00
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both column	nns.) TOTAL		0.00	0.00
19. Debts OWED BY the committee (Use Schedule D.)			0.00	
20. Debts OWED TO the committee (Use Schedule E.)			0.00	
CERTIFICATION				R OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELI	EF IT IS TRUE, CO	RRECT AND C		N OFFICE USE UNLY

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 Treasurer/Candidate	Date (mm/dd/yy) 11/13/2017		
Signature of Candidate (if applicable)		Date (mm/dd/yy) 11/13/2017		
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 felow. (IC 3-14-14) A person who followed for the commits a level 6 felow.				

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IS THIS AN AMENDMENT? Yes

Indiana Election Division (IC 3-9-5-14)

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(CFA-4) Summary Sheet

	Summary Sneet	
4	FILE NUMBER	
OTAL	. PAGES IN ENTIRE CFA-4 REPORT	

COMMITTEE INFO	DRMATION				
1. Full Name of Committee (as on Statement of Organization)					
Friends of Zach Payne					
2. Acronym or Abbreviated Name (if any)		3. Comr	Carlo Carlo Carlo Carlo Carlo	phone Number	
		(812	2 ₎ 841	1-5473	
4. Mailing Address (Address where all campaign finance correspondence is receive 957 Main Street	ed.) 🗌 CI	neck if thi	is is a new	address.	
5. City, State, ZIP Code 6. Party Affiliation (if applicable)					
Charlestown, Indiana, 47111			blican		
CANDIDATE INFORMATION (For Ca	andidate's Co	mmitte	es Only)		
7. Full Name of Candidate (Include any nickname.)		8. Party	Affiliation of	or If Independen	nt Candidate
Zachary Charles Payne		Repu	ıblican		
 Office Sought (Include district number, if any. Not required for exploratory com Recorder 	nmittee.)	10. Cou Clark	nty of Resid	dence	
TYPE OF REPORT				CONVENTIO	N CANDIDATES ONLY
11. Check one:				Check one:	
Pre-Primary Pre-Election Annual Nomination Other				Pre-Conv	rention
Final / Disbands Committee (Lines 18, 19, and 20 must be '0".) Outgoing Treasurer (Within ten (10))	0) days amend States	ment of Orga	anization.)	Post-Con	vention
12. Reporting Period (mm/dd/yy): From: 01/01/2015 Through: 12/31/2015				UMN A Period	COLUMN B Year to Date
From: 01/01/2015 Through: 12/31/2015				Period	
From: 01/01/2015 Through: 12/31/2015 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS				Period	Year to Date
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