



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R14 / 10-17)  
Indiana Election Division (IC 3-9-5-14)

## (CFA-4) Summary Sheet

14-01-20P03:10 FI

**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

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

12

### COMMITTEE INFORMATION

1. Full Name of Committee (as on *Statement of Organization*) ☐ Check if this is a new name.

Committee to Elect Treva Hodges

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

( 812 ) 896-5647

4. Mailing Address (Address where all campaign finance correspondence is received.)

P.O. Box 575

☐ Check if this is a new address.

5. City, State, ZIP Code

Charlestown, IN 47111

6. Party Affiliation (if applicable)

Democrat

### CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (Include any nickname.)

Treva E. Hodges

8. Party Affiliation or If Independent Candidate

Democrat

9. Office Sought (Include district number, if any. Not required for exploratory committee.)

Mayor, City of Charlestown

10. County of Residence

Clark

### TYPE OF REPORT

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 Organization.)

### CONVENTION CANDIDATES ONLY

Check one:

☐ Pre-Convention

☐ Post-Convention

12. Reporting Period (mm/dd/yy):

From: 10/12/19

Through: 12/31/19

COLUMN A  
This Period

COLUMN B  
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

7,851.22

14. Cash on hand and investments January 1, current year.

1,136.30

### CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (Use Schedule A.)

28,371.35

53,886.96

15b. Unitemized

1,267.00

6,592.34

15c. Add lines 15a and 15b in both columns.

**SUBTOTAL**

29,638.35

60,479.30

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.

**TOTAL**

37,489.57

61,615.60

### EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)

23,822.46

46,575.91

17b. Unitemized

802.54

5,020.24

17c. Add lines 17a and 17b in both columns.

**SUBTOTAL**

24,625.00

51,596.15

18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)

**TOTAL**

12,864.57

10,019.45

19. Debts OWED BY the committee (Use Schedule D.)

0.00

20. Debts OWED TO the committee (Use Schedule E.)

0.00

### 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

*Jim James*

Title

Treasurer

Date (mm/dd/yy)

01/07/20

Signature of Candidate (if applicable)

*Treva Hodges*

Date (mm/dd/yy)

01/11/20

**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

JAN 14 2020

*Susan Papp*  
CLERK CLARK CIRCUIT COURTS



# 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 1 of 7

| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number city, state, ZIP code)                        | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT                                                                                                                                                                                                                              | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE RECEIVED<br>(mm/dd/yy)<br>RECEIVED BY |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|--------------------------------------------|
| 1.<br><br>Darlene Williams<br>1219 Lindsey St.<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____     | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$200.00                          | \$200.00                               | 10/16/19<br><br>Treva Hodges               |
| 2.<br><br>Jerry Cooper<br>109 Industrial Way<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____       | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$500.00                          | \$700.00                               | 10/17/19<br><br>Treva Hodges               |
| 3.<br><br>Dan James<br>8615 S. Dogwood<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____             | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$200.00                          | \$900.00                               | 10/17/19<br><br>Treva Hodges               |
| 4.<br><br>Darrell Tobey<br>320 Level St.<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____           | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$100.00                          | \$1,000.00                             | 10/19/19<br><br>Treva Hodges               |
| 5.<br><br>Christopher Stewart<br>2907 Perryville Road<br>Danville, KY 40422<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$500.00                          | \$1,500.00                             | 10/26 & 12/09<br><br>Treva Hodges          |
| SUBTOTAL THIS PAGE OF SCHEDULE A                                                                                                |                                                                                                                                                                                                                                                                       | \$ 1,500.00                       |                                        |                                            |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet.)                       |                                                                                                                                                                                                                                                                       | \$                                |                                        |                                            |



# 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 2 of 7

| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number city, state, ZIP code)                       | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT                                                                                                                                                                                                                              | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE RECEIVED<br>(mm/dd/yy)<br>RECEIVED BY |
|--------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|--------------------------------------------|
| 1.<br><br>Kristin Pickerell<br>7624 Anthem Drive<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____  | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$100.00                          | \$100.00                               | 11/25/19<br><br>Treva Hodges               |
| 2.<br><br>Debbie Hall<br>7807 Hidden River Trace<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____  | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$100.00                          | \$200.00                               | 11/25/19<br><br>Treva Hodges               |
| 3.<br><br>Sabrina Adams<br>6517 High Jackson Road<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$700.00                          | \$900.00                               | 11/25/19<br><br>Treva Hodges               |
| 4.<br><br>Doug Coombs<br>243 Jefferson St.<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____        | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$200.00                          | \$1,100.00                             | 11/26/19<br><br>Treva Hodges               |
| 5.<br><br>Brian Keith Bryant<br>6325 S 25 W<br>Trafalgar, IN 46181<br><br>Contributor's Occupation (if required) _____         | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$1,250.00                        | \$2,350.00                             | 11/29/19<br><br>Treva Hodges               |
| <b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>                                                                                        |                                                                                                                                                                                                                                                                       | <b>\$ 2,350.00</b>                |                                        |                                            |
| <b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b><br>(Enter total on ITEM 15a of the Summary Sheet.)               |                                                                                                                                                                                                                                                                       | <b>\$</b>                         |                                        |                                            |



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15/15-19)  
Indiana Election Division (IC 3-9-5-14)

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

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FILE NUMBER

Page 3 of 7

| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number city, state, ZIP code)                      | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT                                                                                                                                                                                                                              | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE RECEIVED<br>(mm/dd/yy)<br>RECEIVED BY |
|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|--------------------------------------------|
| 1.<br><br>William E. Hall<br>590 Robert Court<br>Greenfield, IN 46140<br><br>Contributor's Occupation (if required) _____     | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$1,250.00                        | \$1,250.00                             | 11/29/19<br><br>Treva Hodges               |
| 2.<br><br>Friends of Julie Berry<br>107 Cherry Trace<br>Madison, IN 47250<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$1,000.00                        | \$2,250.00                             | 12/04/19<br><br>Treva Hodges               |
| 3.<br><br>Terry Baker<br>16162 Morningside Court<br>Noblesville, IN 46060<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$2,000.00                        | \$4,250.00                             | 12/04/19<br><br>Treva Hodges               |
| 4.<br><br>Benita Pate<br>7320 County Road 403<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____    | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$100.00                          | \$4,350.00                             | 12/04/19<br><br>Treva Hodges               |
| 5.<br><br>Sharon Coots<br>7475 Bethany Road<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____      | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$1,000.00                        | \$5,350.00                             | 12/04/19                                   |
| <b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>                                                                                       |                                                                                                                                                                                                                                                                       | <b>\$ 5,350.00</b>                |                                        |                                            |
| <b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b><br>(Enter total on ITEM 15a of the Summary Sheet.)              |                                                                                                                                                                                                                                                                       | <b>\$</b>                         |                                        |                                            |



# 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

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FILE NUMBER --

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| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)                        | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT                                                                                                                                                                                                                                                       | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B -<br>CUMULATIVE<br>YEAR-TO-DATE | DATE RECEIVED<br>(mm/dd/yy)<br>RECEIVED BY |
|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------------------------|--------------------------------------------|
| 1.<br><br>Kevin Christman<br>8103 High Jackson Road<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____                          | \$250.00                          | \$250.00                                 | 12/11/19<br><br>Treva Hodges               |
| 2.<br><br>Loren Christman<br>8508 Bonniebelle Drive<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____                          | \$40.00                           | \$290.00                                 | 12/16/19<br><br>Treva Hodges               |
| 3.<br><br>Scott Coots<br>1811 County Road 160<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____       | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____                          | \$500.00                          | \$790.00                                 | 12/17/19<br><br>Treva Hodges               |
| 4.<br><br>Stewart Sears<br>205 Long St., Apt. 6<br>North Vernon, IN 47265<br><br>Contributor's Occupation (if required) _____    | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____                          | \$1,000.00                        | \$1,790.00                               | 12/19/19<br><br>Treva Hodges               |
| 5.<br><br>Donna Ennis<br>8304 Indian Caves Court<br>Charlestown, IN 47111<br><br>Contributor's Occupation (if required) _____    | Contributions:<br><input type="checkbox"/> Direct<br><input checked="" type="checkbox"/> In-Kind (describe)<br><u>Food, Election Night</u><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) _____ | \$401.35                          | \$2,191.35                               | 11/05/19<br><br>Treva Hodges               |
| SUBTOTAL THIS PAGE OF SCHEDULE A                                                                                                 |                                                                                                                                                                                                                                                                                                | \$ 2,191.35                       |                                          |                                            |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet.)                        |                                                                                                                                                                                                                                                                                                | \$                                |                                          |                                            |

**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-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 5 of 7

| CONTRIBUTOR'S FULL NAME AND<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)           | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT                                                                                                                                                                                                                                          | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE RECEIVED<br>(mm/dd/yy)       |
|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|-----------------------------------|
|                                                                                                          |                                                                                                                                                                                                                                                                                   |                                   |                                        | RECEIVED BY                       |
| 1.<br><br>Taft, Stettinius & Hollister<br>1 Indiana Square, #3500<br>Indianapolis, IN 46204              | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)                         | \$250.00                          | \$250.00                               | 10/22/19<br><br>Treva Hodges      |
| 2.<br><br>BHL Properties LLC<br>1829 East Sprint St.<br>New Albany, IN 47150                             | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)                         | \$1,500.00                        | \$1,750.00                             | 10/23 & 11/25<br><br>Treva Hodges |
| 3.<br><br>Emerald Construction Co.<br>3705 Dove Circle<br>New Albany, IN 47150                           | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)                         | \$500.00                          | \$2,250.00                             | 11/27/19<br><br>Treva Hodges      |
| 4.<br><br>No Moore, Inc.<br>300 Spring St., Suite 3A<br>Jeffersonville, IN 47130                         | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)                         | \$1,500.00                        | \$3,750.00                             | 12/04/19<br><br>Treva Hodges      |
| 5.<br><br>Lowe Law Office<br>815 E. Market St.<br>New Albany, IN 47150                                   | Contributions:<br><input type="checkbox"/> Direct<br><input checked="" type="checkbox"/> In-Kind (describe)<br><u>Legal Service</u><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) | \$11,730.00                       | \$15,480.00                            | 11/07-12/16<br><br>Treva Hodges   |
| SUBTOTAL THIS PAGE OF SCHEDULE A                                                                         |                                                                                                                                                                                                                                                                                   | \$ 15,480.00                      |                                        |                                   |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet) |                                                                                                                                                                                                                                                                                   | \$                                |                                        |                                   |



**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-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 6 of 7

| CONTRIBUTOR'S FULL NAME AND<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)            | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT                                                                                                                                                                                                                  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE RECEIVED<br>(mm/dd/yy)   |
|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|-------------------------------|
|                                                                                                           |                                                                                                                                                                                                                                                           |                                   |                                        | RECEIVED BY                   |
| 1.<br><br>Beam, Longest & Neff<br>916 Lily Creek Road, Suite 202<br>Louisville, KY 40243                  | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify) | \$500.00                          | \$500.00                               | .12/20/19<br><br>Treva Hodges |
| 2.                                                                                                        | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)            |                                   |                                        |                               |
| 3.                                                                                                        | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)            |                                   |                                        |                               |
| 4.                                                                                                        | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)            |                                   |                                        |                               |
| 5.                                                                                                        | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)            |                                   |                                        |                               |
| SUBTOTAL THIS PAGE OF SCHEDULE A                                                                          |                                                                                                                                                                                                                                                           | \$ 500.00                         |                                        |                               |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet.) |                                                                                                                                                                                                                                                           | \$                                |                                        |                               |

**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-4)  
CONTRIBUTIONS BY  
POLITICAL ACTION COMMITTEES  
Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES 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 political action committees **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees **MUST** be itemized on this schedule. 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

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| CONTRIBUTOR'S FULL NAME AND<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)                         | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT                                                                                                                                                                                                                                                          | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE RECEIVED<br>(mm/dd/yy) |  |
|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|-----------------------------|--|
|                                                                                                                        |                                                                                                                                                                                                                                                                                                   |                                   |                                        | RECEIVED BY                 |  |
| 1.<br><br>Indiana Ninth Congressional District<br>Central Committee<br>3732 W. Parkview Drive<br>Bloomington, IN 47404 | Contributions:<br><input type="checkbox"/> Direct<br><input checked="" type="checkbox"/> In-Kind (describe)<br><u>Internet Advertising</u><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)<br>_____ | \$1,000.00                        | \$1,000.00                             | 10/30/19                    |  |
|                                                                                                                        |                                                                                                                                                                                                                                                                                                   |                                   |                                        | Google Website              |  |
| 2.                                                                                                                     | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br>_____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)<br>_____                                  |                                   |                                        |                             |  |
|                                                                                                                        |                                                                                                                                                                                                                                                                                                   |                                   |                                        |                             |  |
| 3.                                                                                                                     | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br>_____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)<br>_____                                  |                                   |                                        |                             |  |
|                                                                                                                        |                                                                                                                                                                                                                                                                                                   |                                   |                                        |                             |  |
| 4.                                                                                                                     | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br>_____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)<br>_____                                  |                                   |                                        |                             |  |
|                                                                                                                        |                                                                                                                                                                                                                                                                                                   |                                   |                                        |                             |  |
| 5.                                                                                                                     | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br>_____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Miscellaneous (specify)<br>_____                                  |                                   |                                        |                             |  |
|                                                                                                                        |                                                                                                                                                                                                                                                                                                   |                                   |                                        |                             |  |
| SUBTOTAL THIS PAGE OF SCHEDULE A                                                                                       |                                                                                                                                                                                                                                                                                                   | \$ 1,000.00                       |                                        |                             |  |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet.)              |                                                                                                                                                                                                                                                                                                   | \$ 28,371.35                      |                                        |                             |  |



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4806 (R15 / 5-19)

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

## (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

**INSTRUCTIONS:** 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 expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

FILE NUMBER

Page 1 of 4

| RECIPIENT'S NAME AND MAILING ADDRESS<br>(street, number, city, state, ZIP code)                           | RECIPIENT'S OCCUPATION          | TYPE OF EXPENDITURE<br>and<br>PURPOSE (be specific)                                                                                                                                                                                 | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE<br>(mm/dd/yy) |
|-----------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|--------------------------------------|
|                                                                                                           | OFFICE SOUGHT (if applicable)   |                                                                                                                                                                                                                                     |                                   |                                        |                                      |
| Code <u>A</u><br><br>Amazon                                                                               | Internet Sales<br><br>N.A.      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$45.95                           | \$45.95                                | 10/18/19                             |
| Code <u>A</u><br><br>Amos Publishing Co.<br>669 W. Cherry St.<br>Scottsburg, IN 47102                     | Newspaper Publisher<br><br>N.A. | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$617.00                          | \$662.95                               | 10/24, 12/28                         |
| Code <u>O</u><br><br>AT&T<br>P.O. Box 5014<br>Carol Stream, IL 60197                                      | Internet Service<br><br>N.A.    | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$157.29                          | \$820.24                               | 10/22-12/21                          |
| Code <u>O</u><br><br>Clark County Democrat Party<br>P.O. Box 71<br>Sellersburg, IN 47172                  | Political Party<br><br>N.A.     | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$300.00                          | \$1,120.24                             | 11/19/19                             |
| Code <u>O</u><br><br>Charlestown Pizza Co.<br>850 Main St.<br>Charlestown, IN 47111                       | Restaurant<br><br>N.A.          | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$50.84                           | \$1,171.08                             | 10/19/19                             |
| Code <u>O</u><br><br>Charlestown Pizza Co.<br>850 Main St.<br>Charlestown, IN 47111                       | Restaurant<br><br>N.A.          | <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other <u>Food</u><br>Purpose: | \$57.00                           | \$1,228.08                             | 11/04/19                             |
| Code <u>O</u><br><br>Dollar General<br>900 Market St.<br>Charlestown, IN 47111                            | Retail Sales<br><br>N.A.        | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$100.00                          | \$1,328.08                             | 11/04/19                             |
| SUBTOTAL THIS PAGE OF SCHEDULE B                                                                          |                                 |                                                                                                                                                                                                                                     | \$ 1,328.08                       |                                        |                                      |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br>(Enter total on ITEM 17a of the Summary Sheet.) |                                 |                                                                                                                                                                                                                                     | \$                                |                                        |                                      |



# 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 B) ITEMIZED EXPENDITURES

**INSTRUCTIONS:** 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 expenditures totaled on **ITEM 17a** of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

FILE NUMBER

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| RECIPIENT'S NAME AND MAILING ADDRESS<br>(street, number, city, state, ZIP code)                           | RECIPIENT'S OCCUPATION        | TYPE OF EXPENDITURE<br>and<br>PURPOSE (be specific)                                                                                                                                                                                          | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE<br>(mm/dd/yy) |
|-----------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|--------------------------------------|
|                                                                                                           | OFFICE SOUGHT (if applicable) |                                                                                                                                                                                                                                              |                                   |                                        |                                      |
| Code <u>O</u><br>Duke Energy<br>P.O. Box 1326<br>Charlotte, NC 28201                                      | Energy Provider               | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:                      | \$54.97                           | \$54.97                                | 10/19, 11/22                         |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                              |                                   |                                        |                                      |
| Code <u>A</u><br>Facebook<br>Internet                                                                     | Internet Advertising          | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:                      | \$1,067.09                        | \$1,122.06                             | 10/20-11/20                          |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                              |                                   |                                        |                                      |
| Code <u>A</u><br>Google<br>Internet                                                                       | Internet Sales                | <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other <u>Internet Ads</u><br>Purpose:  | \$1,000.00                        | \$2,122.06                             | 10/30/19                             |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                              |                                   |                                        |                                      |
| Code <u>O</u><br>Highway Press<br>2199 Hamburg Pike<br>Jeffersonville, IN 47130                           | Printing Services             | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:                      | \$135.57                          | \$2,257.63                             | 10/22/19                             |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                              |                                   |                                        |                                      |
| Code <u>O</u><br>Indiana Farmers Insurance Co.<br>P.O. Box 856<br>Indianapolis, IN 46206                  | Insurance Services            | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:                      | \$117.20                          | \$2,374.83                             | 11/13, 12/11                         |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                              |                                   |                                        |                                      |
| Code <u>O</u><br>Lowe Law Office<br>815 E. Market St.<br>New Albany, IN 47150                             | Legal Services                | <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other <u>Legal Service</u><br>Purpose: | \$11,730.00                       | \$14,104.83                            | 11/07-12/16                          |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                              |                                   |                                        |                                      |
| Code <u>O</u><br>Mark's Feed Store<br>3827 Charlestown Rd.<br>New Albany, IN 47150                        | Restaurant                    | <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other <u>Food</u><br>Purpose:          | \$313.97                          | \$14,418.80                            | 11/05/19                             |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                              |                                   |                                        |                                      |
| SUBTOTAL THIS PAGE OF SCHEDULE B                                                                          |                               |                                                                                                                                                                                                                                              | \$ 14,418.80                      |                                        |                                      |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br>(Enter total on ITEM 17a of the Summary Sheet.) |                               |                                                                                                                                                                                                                                              | \$                                |                                        |                                      |



# 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 B) ITEMIZED EXPENDITURES

**INSTRUCTIONS:** 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 expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

FILE NUMBER

Page 3 of 4

| RECIPIENT'S NAME AND MAILING ADDRESS<br>(street, number, city, state, ZIP code)                           | RECIPIENT'S OCCUPATION        | TYPE OF EXPENDITURE<br>and<br>PURPOSE (be specific)                                                                                                                                                                                 | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE<br>(mm/dd/yy) |
|-----------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|--------------------------------------|
|                                                                                                           | OFFICE SOUGHT (if applicable) |                                                                                                                                                                                                                                     |                                   |                                        |                                      |
| Code <u>0</u><br>Meijers<br>2750 Allison Lane<br>Jeffersonville, IN 47130                                 | Retail Sales                  | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$364.84                          | \$364.84                               | 11/26, 12/09                         |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                     |                                   |                                        |                                      |
| Code <u>0</u><br>Nell Quire<br>910 Main St.<br>Charlestown, IN 47111                                      | Landlord                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$350.00                          | \$714.84                               | 10/31/19                             |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                     |                                   |                                        |                                      |
| Code <u>0</u><br>Sam's Club<br>1301 Veterans Parkway<br>Clarksville, IN 47129                             | Retail Sales                  | <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other <u>Food</u><br>Purpose: | \$87.38                           | \$802.22                               | 11/05/19                             |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                     |                                   |                                        |                                      |
| Code <u>0</u><br>U.S. Post Office<br>361 Main Cross St.<br>Charlestown, IN 47111                          | Postal Delivery Service       | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$240.00                          | \$1,042.22                             | 10/23-11/01                          |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                     |                                   |                                        |                                      |
| Code <u>0</u><br>Vectren<br>200 N. Main St.<br>Evansville, IN                                             | Energy Provider               | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$66.53                           | \$1,108.75                             | 10/31, 12/03                         |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                     |                                   |                                        |                                      |
| Code <u>A</u><br>VistaPrint<br>Internet                                                                   | Promotional Material Vendor   | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$241.81                          | \$1,350.56                             | 10/19/19                             |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                     |                                   |                                        |                                      |
| Code <u>0</u><br>Walmart<br>1361 Veterans Parkway<br>Clarksville, IN 47129                                | Retail Sales                  | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other<br>Purpose:             | \$37.02                           | \$1,387.58                             | 10/30/19                             |
|                                                                                                           | N.A.                          |                                                                                                                                                                                                                                     |                                   |                                        |                                      |
| SUBTOTAL THIS PAGE OF SCHEDULE B                                                                          |                               |                                                                                                                                                                                                                                     | \$ 1,387.58                       |                                        |                                      |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br>(Enter total on ITEM 17a of the Summary Sheet.) |                               |                                                                                                                                                                                                                                     | \$                                |                                        |                                      |



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4806 (R15 / 5-19)

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

## (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

**INSTRUCTIONS:** 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 expenditures totaled on **ITEM 17a** of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

FILE NUMBER

Page 4 of 4

| RECIPIENT'S NAME AND MAILING ADDRESS<br>(street, number, city, state, ZIP code)                           | RECIPIENT'S OCCUPATION        | TYPE OF EXPENDITURE<br>and<br>PURPOSE (be specific)                                                                                                                                                                           | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE<br>(mm/dd/yy) |
|-----------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------|--------------------------------------|
|                                                                                                           | OFFICE SOUGHT (if applicable) |                                                                                                                                                                                                                               |                                   |                                        |                                      |
| Code <u>A</u><br>Wildfire Contact<br>1425 K Street NW<br>Washington, DC 20005                             | Campaign Material Services    | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: | \$6,688.00                        | \$6,688.00                             | 10/15-10/22                          |
| Code _____                                                                                                |                               | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            |                                   |                                        |                                      |
| Code _____                                                                                                |                               | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            |                                   |                                        |                                      |
| Code _____                                                                                                |                               | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            |                                   |                                        |                                      |
| Code _____                                                                                                |                               | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            |                                   |                                        |                                      |
| Code _____                                                                                                |                               | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            |                                   |                                        |                                      |
| Code _____                                                                                                |                               | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            |                                   |                                        |                                      |
| Code _____                                                                                                |                               | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            |                                   |                                        |                                      |
| SUBTOTAL THIS PAGE OF SCHEDULE B                                                                          |                               |                                                                                                                                                                                                                               | \$ 6,688.00                       |                                        |                                      |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br>(Enter total on ITEM 17a of the Summary Sheet.) |                               |                                                                                                                                                                                                                               | \$ 23,822.46                      |                                        |                                      |