



REPORT OF RECEIPTS AND EXPENDITURES A POLITICAL COMMITTEE

State Form 4606 (R14 / 10-17)

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

OF

(CFA-4)

Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

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

COMMITTEE INFORMATION

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

Friends of Lisa Gill

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(812) 989-2055

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

☐ Check if this is a new address.

2048 Cardinal Ln.

5. City, State, ZIP Code

6. Party Affiliation (if applicable)

Jeffersonville Ind 47130

Republican

CANDIDATE INFORMATION (For Candidate's Committees Only)

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

8. Party Affiliation or If Independent Candidate

LISA GILL

Republican

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

10. County of Residence

Jeffersonville City Clerk

Clark

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 Organization.)

Check one:

☐ Pre-Convention☐ Post-Convention

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

From: 4-13

Through: 10-11

COLUMN A
This PeriodCOLUMN B
Year to Date

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

500

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

-

CONTRIBUTIONS AND RECEIPTS

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

15a. Itemized (Use Schedule A.)

1500

1500

15b. Unitemized

195

195

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

SUBTOTAL

1695

1695

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

TOTAL

2195

2195

EXPENDITURES

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

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

1771.95

1771.95

17b. Unitemized

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

SUBTOTAL

1771.95

1771.95

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

TOTAL

423.05

423.05

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)

Signature of Candidate (if applicable)

Date (mm/dd/yy)

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

OCT 17 2019

Susan Papp
CLERK CLARK CIRCUIT COURTS



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OF A POLITICAL COMMITTEE**

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

Indiana

**(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 1

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy)
				RECEIVED BY
1. Larry Wilder Jeffersonville Ind 3501 Euk Point Blvd. Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	250-		4-15-19 LISA GILL
2. Jorge LANZ 1201 Park Hills Ct. Louisville, Ky Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	300-		4-19-19 LISA GILL
3. CHRIS FOX Jeffersonville Ind Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	500-		8-6-19 LISA GILL
4. Scotte Maples Jeffersonville Ind Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	100-		8-19-19 LISA GILL
5. Scott Maples Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	100-		9-11-19 LISA GILL
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 1250.00		
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-5)
CONTRIBUTIONS BY
OTHER ORGANIZATIONS**

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND 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 other entities **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 candidate's, legislative caucus, and regular party 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

Page 1 of 1

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. Hoosiers for Jeffersonville 5006 Upperiver Rd. Jeffersonville Ind 47130	Contributions: ☒ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____	250 ⁰⁰		8-9-19 Lisa Gill
2.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
3.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
4.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
5.	Contributions: ☐ Direct ☐ In-Kind (describe) _____ Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify) _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 250.00		
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 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 (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code <u>A</u> Lotus Signs CHARLESTOWN IN	516N MAKER	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: <u>516NS</u>	288.90		4-25-19
Code <u>A</u> Goodguys Sign TAMPA FL.	516N COMPANY	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: <u>516NS</u>	421.38		7-12-19
Code <u>A</u> Vista print	Card Company	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: <u>PUSH CARDS</u>	242.32		7-16-19
Code <u>A</u> FAST 316NS JEFFERSONVILLE	516N Company	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: <u>CAR MAGNETS</u>	59.92		7-3-19
Code <u>A</u> FAST 516NS JEFFERSONVILLE	516N Company	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: <u>CAR MAGNETS</u>	59.92		9-4-19
Code <u>F</u> Meijer JEFFERSONVILLE	Grocery Store Food For Fundraiser	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: <u>Fundraiser</u>	108.69		9-5
Code <u>F</u> Sams Club Clarksville Ind	Refuel Store Food for Fundraiser	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose: <u>Fundraiser</u>	40.84		9-5
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 1221.97		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$		



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**(CFA-4 SCHEDULE C)
ITEMIZED EXPENDITURES
For Public Questions**

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. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, **MUST** be itemized on this schedule.

FILE NUMBER

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PUBLIC QUESTION INFORMATION

Enter Text of Public Question.

Type of Question: ☐ Statewide ☐ Local

Position: ☐ Supported ☐ Opposed

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code <u>A1</u> Sacred Heart Church 1840 E. 8th Street	Church	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: <u>Ad</u>	100-		8-7-19
Code <u>A1</u> Back the Blues SK Run Jeff FOP	Police Dept.	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: <u>Ad</u>	250-		8-24-19
Code _____ JNLA	Neighborhood Group	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: <u>Ad</u>	200-		8-18-19
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE C			\$ 550.00		
TOTAL OF ALL PAGES OF SCHEDULE C ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$		