



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

5

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 Brad Jacobs	
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number (812) 207-3555
4. Mailing Address (address where all campaign finance correspondence is received) ☐ Check if this is a new address 2702 Emerald Lake	
5. City, State, ZIP Code Charlestown, IN 47111	6. Party Affiliation (if applicable) Republican

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname) Bradley Jacobs	8. Party Affiliation or If Independent Candidate Republican
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Judge Clark Circuit Court No. 2	10. County of Residence 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 10 days amend Statement of Organization)	Check one: ☐ Pre-Convention ☐ Post-Convention
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12. Reporting Period: From: 1/1/2019 Through: 12/31/2019	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	\$0	
14. Cash on hand and investments January 1, current year.		\$0

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		
15a. Itemized (use Schedule A)	\$4,051.63	\$4,051.63
15b. Unitemized	\$0	\$0
15c. Add lines 15a and 15b in both columns SUBTOTAL	\$0	\$0
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL	\$4,051.63	\$4,051.63

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized (use Schedule B) (Public Question: use Schedule C)	\$3,032.39	\$3,032.39
17b. Unitemized	\$0	\$0
17c. Add lines 17a and 17b in both columns SUBTOTAL	\$3,032.39	\$3,032.39
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL	\$1,019.24	\$1,019.24
19. Debts OWED BY the committee (use Schedule D)	\$500	
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 <i>[Signature]</i>	Title Treasurer	Date 1/14/2020
Signature of Candidate (if applicable) <i>[Signature]</i>		Date 1-14-2020

FOR OFFICE USE ONLY

JAN 14 2020

CLERK CLARK CIRCUIT COURTS



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(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 5

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
				RECEIVED BY
1. Brad and April Jacobs 2702 Emerald Lake Drive Charlestown, IN 47111 Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☒ Loan ☐ Misc. (specify)	\$500	\$500	8/22/2019 April Jacobs
2. Larry Wilder 530 E. Court Ave Jeffersonville, IN 47130 Contributor's Occupation (if required) <u>Attorney</u>	Contributions: ☐ Direct ☒ In-Kind (describe) Shirts Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	\$973.70	\$973.70	8/29/2019 April Jacobs
3. Amanda Beam 3003 Oak Valley Ct. N. Lanesville, IN 47136 Contributor's Occupation (if required) _____	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	\$250	\$250	9/11/2019 April Jacobs
4. Larry Wilder 530 E. Court Ave Jeffersonville, IN 47130 Contributor's Occupation (if required) <u>Attorney</u>	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	\$1000	\$1,973.70	12/2/2019 April Jacobs
5. Brad and April Jacobs 2702 Emerald Lake Charlestown, IN 47111 Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☒ In-Kind (describe) Shirts Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	\$202.23	\$702.23	7/15/2019 April Jacobs
SUBTOTAL THIS PAGE OF SCHEDULE A		\$2,925.93		
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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Indiana Election Commission (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 5

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
				RECEIVED BY
1. Brad and April Jacobs 2702 Emerald Lake Charlestown, IN 47111 Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☒ In-Kind (describe) Shirts Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____	\$545.70	\$1,247.93	6/14/2019 April Jacobs
2. Brad and April Jacobs 2702 Emerald Lake Charlestown, IN 47111 Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☒ In-Kind (describe) Shirts Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____	\$580.00	\$1,827.93	
3. Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____			
4. Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____			
5. Contributor's Occupation (if required) _____	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$1,125.70		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$4,051.63		

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Indiana Election Commission (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 (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
	OFFICE SOUGHT (if applicable)				
Code <u>A</u> Sampan 202 Ash Street Jeffersonville, IN 4713	Printing & Advertising	☐ Direct ☒ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Shirts	\$973.70	\$973.70	8/29/2019
Code <u>C</u> Children and family advocate Jeffersonville, IN 47130	Non Profit	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Charity/table sponsor	\$200	\$200	9/10/19
Code <u>A</u> Sampan 202 Ash Street Jeffersonville, IN 47130	Printing & Advertising	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Shirts	\$130.54	\$1,104.24	9/12/19
Code <u>C</u> Jeffersonville Fire Dept local 558 2204 E. 10 th St Jeffersonville, IN 47130	Fire Department	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Donation	\$50	\$50	9/27/19
Code <u>C</u> Jeffersonville Girls Basketball Booster Club 2315 Allison Ln Jeffersonville, IN 47130	Public Education Sports Program	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Team sponsor	\$100	\$100	10/16/19
Code <u>C</u> JHS Cheer 2325 Allison Ln Jeffersonville, IN 47130	Public Education Sports Program	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Team sponsor	\$100	\$100	10/16/19
Code <u>C</u> Clark County Youth Shelter 118 E. Chestnut St Jeffersonville, IN 47130	Non profit	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Charity/table sponsor	\$150	\$150	12/3/19
SUBTOTAL THIS PAGE OF SCHEDULE B			\$1704.24		
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 B)
ITEMIZED EXPENDITURES**

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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
Code <u>A</u> Sampan 202 Ash Street Jeffersonville, IN 47130	Printing & Advertising	☐ Direct ☒ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Shirts	\$202.45	\$1,306.69	
Code <u>A</u> Sampan 202 Ash Street Jeffersonville, IN 47130	Printing & Advertising	☐ Direct ☒ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Shirts	\$545.70	\$1852.39	
Code <u>A</u> The Shirt Lady Charlestown, IN 47111	Printing & Advertising	☐ Direct ☒ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose: Shirts	\$580.00	\$580.00	
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:			
Code _____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$1,328.15		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$3,032.39		

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**(CFA-4 SCHEDULE D)
DEBTS OWED BY THIS COMMITTEE**

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. List all debts and loans, regardless of the amount, **OWED BY** the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD			
		NATURE OF DEBT						
Brad and April Jacobs 2702 Emerald Lake Charlestown, IN 47111 LENDER'S OCCUPATION:		\$500	8/22/2019		\$500			
		Loan						
LENDER'S OCCUPATION:								
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SUBTOTAL THIS PAGE OF SCHEDULE D					\$500			
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY					\$500			