



# 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

**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 |
| 10                                 |

| COMMITTEE INFORMATION                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name<br><b>Duane BRENTON Campaign Fund</b>                                                                                                                                                                                                                                          | 3. Committee Telephone Number<br><b>(317) 721 3676</b>                                                                                                                            |
| 2. Acronym or Abbreviated Name (if any)                                                                                                                                                                                                                                                                                                                                                         | 4. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address<br><b>11807 ALLISON VALLE RD # 222</b> |
| 5. City, State, ZIP Code<br><b>Fishers IN 46038</b>                                                                                                                                                                                                                                                                                                                                             | 6. Party Affiliation (if applicable)<br><b>LABERTON</b>                                                                                                                           |
| CANDIDATE INFORMATION (For Candidate's Committees Only)                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                   |
| 7. Full Name of Candidate (include any nickname)<br><b>Duane DORN BRENTON</b>                                                                                                                                                                                                                                                                                                                   | 8. Party Affiliation or If Independent Candidate<br><b>LABERTON</b>                                                                                                               |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.)<br><b>HAMILTON COUNTY COUNCIL AT LARGE</b>                                                                                                                                                                                                                                                          | 10. County of Residence<br><b>HAMILTON</b>                                                                                                                                        |
| TYPE OF REPORT                                                                                                                                                                                                                                                                                                                                                                                  | CONVENTION CANDIDATES ONLY                                                                                                                                                        |
| 11. Check one:<br><input type="checkbox"/> Pre-Primary <input checked="" type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other<br><input type="checkbox"/> Final/Disbands Committee (lines 18, 19, and 20 must be "0") <input type="checkbox"/> Outgoing Treasurer (within 10 days amend Statement of Organization) | Check one:<br><input type="checkbox"/> Pre-Convention<br><input checked="" type="checkbox"/> Post-Convention                                                                      |
| 12. Reporting Period:<br>From: <b>6/28/16</b> Through: <b>7/19/16</b>                                                                                                                                                                                                                                                                                                                           | <b>COLUMN A</b><br>This Period                                                                                                                                                    |
| 13. Cash on hand and investments at the beginning of this reporting period.                                                                                                                                                                                                                                                                                                                     | <b>COLUMN B</b><br>Year to Date                                                                                                                                                   |
| 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)                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                   |
| 15b. Unitemized                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                   |
| 15c. Add lines 15a and 15b in both columns <b>SUBTOTAL</b>                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                   |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B <b>TOTAL</b>                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                   |
| EXPENDITURES                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                   |
| (Note: These amounts include in-kind expenditures and loan repayments.)                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                   |
| 17a. Itemized (use Schedule B) (Public Question: use Schedule C)                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                   |
| 17b. Unitemized                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                   |
| 17c. Add lines 17a and 17b in both columns <b>SUBTOTAL</b>                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                   |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) <b>TOTAL</b>                                                                                                                                                                                                                                                                          |                                                                                                                                                                                   |
| 19. Debts OWED BY the committee (use Schedule D)                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                   |
| 20. Debts OWED TO the committee (use Schedule E)                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                   |

| CERTIFICATION                                                                                                                                                                                                                                    |                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| I, OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.                                                                                                                                                                                  |                        |
| Title<br><b>TREASURER</b>                                                                                                                                                                                                                        | Date<br><b>7/19/16</b> |
|                                                                                                                                                                                                                                                  | Date<br><b>7/19/16</b> |
| or sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly person who fails to file a complete or accurate report as required by the Indiana 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

2016 JUL 26 AM 10:52  
HAMILTON COUNTY CLERK  
TAMMY BANTZ