



**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

2

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
Doug Carter for Commissioner

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number
(317) 431-9333

4. Mailing Address (address where all campaign finance correspondence is received) Check if this is a new address
23559 Fall Road

5. City, State, ZIP Code
Cicero, IN 46034

6. Party Affiliation (if applicable)
Republican

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)
Douglas G. Carter

8. Party Affiliation or If Independent Candidate
Republican

9. Office Sought (Include district number, if any. **Not required for exploratory committee.**)
Hamilton County Commissioner, District 3

10. County of Residence
Hamilton

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

12. Reporting Period:	COLUMN A This Period	COLUMN B Year to Date
From: 4-14-2012 Through: 10-12-2012		
13. Cash on hand and investments at the beginning of this reporting period.	\$5,128.49	
14. Cash on hand and investments January 1, current year.		\$5,728.49

CONTRIBUTIONS AND RECEIPTS

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

15a. Itemized (use Schedule A)	\$ -0-	\$ 300.00
15b. Unitemized	\$ -0-	\$ -0-
15c. Add lines 15a and 15b in both columns	SUBTOTAL	\$ 300.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	\$6,028.49

EXPENDITURES

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

17a. Itemized (use Schedule B) (Public Question: use Schedule C)	\$3,064.70	\$3,964.70
17b. Unitemized	\$ -0-	\$ -0-
17c. Add lines 17a and 17b in both columns	SUBTOTAL	\$3,964.70
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	\$2,063.79
19. Debts OWED BY the committee (use Schedule D)	\$ -0-	
20. Debts OWED TO the committee (use Schedule E)	\$ -0-	

CERTIFICATION

BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Title Treasurer

Date

10-14-2012

Date

10-14-2012

Not to be used for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly

FOR OFFICE USE ONLY

2012 OCT 17 AM 7:23

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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
Page <u> 1 </u> of <u> 1 </u>

RECIPIENT'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	RECIPIENT'S OCCUPATION <i>OFFICE SOUGHT (if applicable)</i>	TYPE OF EXPENDITURE and PURPOSE <i>(be specific)</i>	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code <u> O </u> Bruce A. Wooldridge 610 Morse Landing Drive Cicero, IN 46034	Business consultant N/A	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: ½ of cost for computer	\$464.70	\$464.70	4-25-2012
Code <u> C </u> Hamilton County Republican Party 7246 Fishers Crossing Drive Fishers, IN 46038	Regular Party Committee N/A	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: Contributions TRANSFER OUT	\$350.00 \$250.00	 \$1,250.00	6-12-2012 8-16-2012
Code <u> C </u> Sheriff John Layton Committee 1313 East Loretta Drive Indianapolis, IN 46227	Sheriff Marion County Indiana Marion County Indiana Sheriff	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: Contribution TRANSFER OUT	\$200.00	\$200.00	7-9-2012
Code <u> C </u> Riverview Hospital Foundation 395 Westfield Road / PO Box 220 Noblesville, IN 46061	Non-profit charitable foundation N/A	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: Contribution	\$300.00	\$300.00	7-12-2012
Code <u> C </u> Mike Pence For Indiana 1435 Chase Court Carmel, IN 46032	Political Committee Governor Of Indiana	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: Contribution TRANSFER OUT	\$ 250.00 \$1,000.00	 \$1,250.00	7-21-2012 8-20-2012
Code <u> C </u> Citizens For Buck 4407 McKibben Drive Kokomo, IN 46902	Real Estate Broker Indiana State Senator, District 21	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: Contribution TRANSFER OUT	\$250.00	\$250.00	7-21-2012
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 3,064.70		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY <i>(Enter total on ITEM 17a of the Summary Sheet)</i>			\$ 3,064.70		