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
5419
TOTAL PAGES IN ENTIRE CFA 4 REPORT
3

***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
Hamilton County Democratic Party Central Committee

2. Acronym or abbreviated name, if any

3. Committee telephone number
(317) 522-1669

4. Mailing address (*address where all campaign finance correspondence is received*) ☐ Check if this is a new address
P.O. Box 1018

5. City, state, ZIP code
Noblesville IN 46060

6. Party affiliation (*if applicable*)
Democratic

CANDIDATE INFORMATION (For Candidate's Committee Only)

7. Full name of candidate (*include any nickname*)

8. Party affiliation or if independent
Democratic

9. Office sought (*include district number, if any. Not required for exploratory committee.*)

10. County of residence

TYPE OF REPORT

11.
Annual

CONVENTION CANDIDATES ONLY

12. Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting period:
From: 10/11/2008 Through: 12/31/2008

		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		5,311.74	
14. Cash on hand and investments January 1, current year.			4,381.75
CONTRIBUTIONS AND RECEIPTS			
(Note: These amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (use Schedule A)		3,060.59	10,911.86
15b. Unitemized		204.16	8,712.73
15c. Add lines 15a, and 15b in both columns	SUBTOTAL	3,264.75	19,624.59
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	8,576.49	24,006.34
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		3,000.00	12,687.88
17b. Unitemized		234.18	5,976.15
17c. Add lines 17a and 17b in both columns	SUBTOTAL	3,234.18	18,664.03
18. Cash on hand and investments at close of this reporting period(subtract 17c from 16 in both columns)	TOTAL	5,342.31	5,342.31
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

Signature on File

Title: Treasurer

Date: 2/11/09

Date:

FOR OFFICE USE ONLY
Filed: Online
2/11/09 1:50 pm

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 Class D 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, 3-9-4-17, 3-9-4-18.)

HAMILTON COUNTY COURTS
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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4506 (R13/11-05)
Indiana Election commission (IC 3-9-5-14)

(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 the 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).

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	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 / RECEIVED BY
1	Committee to Retain Judge Pylitt 12999 Regent Circle Carmel IN 46032	Contribution: Direct	60.59	660.59	10/24/2008 Treasurer
2	Hassan "Rocky" Shanehsaz DBA Shane LLC PO Box 995 Noblesville IN 46061	Contribution: In-Kind Office Space	1,500.00	6,000.00	11/01/2008 Treasurer
3	Hassan "Rocky" Shanehsaz DBA Shane LLC PO Box 995 Noblesville IN 46061	Contribution: In-Kind Office Space	1,500.00	7,500.00	12/01/2008 Treasurer
	SUB TOTAL THIS PAGE OF SCHEDULE A		$ 3,060.59		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		$ 3,060.59		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4806 (R13/11-05)
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 form. 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.

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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: Operations 1 Hassan "Rocky" Shanehsaz DBA Shane LLC PO Box 995 Noblesville IN 46061		Direct Purpose: Office Space	1,500.00	6,000.00	11/01/2008
Code: Operations 2 Hassan "Rocky" Shanehsaz DBA Shane LLC PO Box 995 Noblesville IN 46061		Direct Purpose: Office Space	1,500.00	7,500.00	12/01/2008
		SUB TOTAL THIS PAGE OF SCHEDULE B	$ 3,000.00		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)	$ 3,000.00		