REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

2010 JA 14 AM 11:01

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT 3 - Pages (1)

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
DIPPEL FOR WESTFIELD COUNCIL
2. Acronym or Abbreviated Name *(if any)*
3. Committee Telephone Number (317) 569-2855
4. Mailing Address *(address where all campaign finance correspondence is received)* ☐ Check if this is a new address
683 PIEDMONT DR
5. City, State, ZIP Code
WESTFIELD IN 46074
6. Party Affiliation *(if applicable)* REPUBLICAN

CANDIDATE INFORMATION *(For Candidate's Committees Only)*

7. Full Name of Candidate *(include any nickname)*
JOHN DIPPEL
8. Party Affiliation or If Independent Candidate
REPUBLICAN
9. Office Sought *(Include district number, if any. Not required for exploratory committee.)*
WESTFIELD CITY COUNCIL - DIST 4
10. County of Residence
HAMILTON

TYPE OF REPORT

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)*

CONVENTION CANDIDATES ONLY
Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting Period:
From: JANUARY 1ST 2009 Through: DECEMBER 31, 2009

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	658.28	658.28
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)*	0	0
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	0	0
EXPENDITURES *(Note: These amounts include in-kind expenditures and loan repayments.)*		
17a. Itemized *(use Schedule B) (Public Question: use Schedule C)*	366.12	366.12
17b. Unitemized	67.16	67.16
17c. Add lines 17a and 17b in both columns SUBTOTAL	433.28	433.28
18. Cash on hand and investments at close of this reporting period *(subtract 17c from 16 in both columns)* TOTAL	225.00	225.00
19. Debts OWED BY the committee *(use Schedule D)*	300.00	
20. Debts OWED TO the committee *(use Schedule E)*	-0-	

CERTIFICATION

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

	Title	Date
	TREASURER	1-13-2010
		1-14-2010

ed for sale or used for any commercial purpose. (IC 3-9-1-5) A person who knowingly
A person who fails to file a complete or accurate report as required by the Indiana

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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.

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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 C Jim Buck for State Senate Kokomo, IN	STATE SENATOR	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	50.00	50.00	8-1-2009
Code F Kroger's 161st + Springmill Rd Westfield IN	Food + GAS	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	198.04	198.04	11 months in 2009
Code O Bucky's Restaurant + Bar State Road 32 East Westfield IN	Meetings - Food	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	118.08	118.08	9 months in 2009
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	$366.12		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)	$366.12		

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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.

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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 / NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
JOHN DIPPEL 683 PIEDMONT DR WESTFIELD, IN 46074 LENDER'S OCCUPATION:		LOAN	2005		300.00
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
			SUBTOTAL THIS PAGE OF SCHEDULE D		$
			TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY *(Enter total on ITEM 19 of the Summary Sheet)*		$