REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R9 /11-99)
Indiana Election Commission (IC 3-9-5-14)
Approved by State Board of Accounts 1999

(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
FRIENDS OF KEVIN KIRBY

2. Acronym or abbreviated name, if any

3. Committee telephone number
(317) 573-9518

4. Mailing address (*address where all campaign finance correspondence is received*) ☐ Check if this is a new address
231 1st AVENUE NE

5. City, state, ZIP code
CARMEL IN 46032

6. Party affiliation (*if applicable*)

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

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

8. Party affiliation or if independent
REPUBLICAN

9. Office sought (*include district number, if any. Not required for exploratory committee.*)
CARMEL CITY COUNCIL DIST. 2

10. County of residence
HAMILTON

TYPE OF REPORT

11. Check one
☐ Pre-Primary ☐ Pre-Election ☑ Annual ☐ 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 JAN 1 2004 Through: DEC 31 2004

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period	970.14	
14. Cash on hand and investments January 1, current year.		970.14
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 SUBTOTAL	—	—
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL	970.14	970.14
EXPENDITURES		
(Note. These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized (use Schedule B) (Public Question use Schedule C)	684.91	684.91
17b. Unitemized	191.71	191.71
17c. Add lines 17a and 17b in both columns SUBTOTAL	876.62	876.62
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL	93.52	
19. Debts OWED BY the committee (use Schedule D)	—	
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 on File

FOR OFFICE USE ONLY

FILED
2005 JA 19 AM 10: 47

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.)

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(CFA-4 SCHEDULE B) Itemized Expenditures

FILE NUMBER

Page 2 of 2

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.

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 ___ HAMILTON CNTY GOP		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ___ Purpose: contribution	320 —	320 —	3/23/04
Code ___ STEVE DILLENGER FOR COMMISSIONER	COUNTY COMMISSIONER	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ___ Purpose: Contribution	100 —	100 —	3/29/04
Code ___ HAMILTON CNTY GOP		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ___ Purpose: contribution	60 —	380 —	6/4/04
Code ___ KEVIN J. KIRBY	SALES	☐ Direct ☐ In-Kind ☑ Payment of Debt ☐ Returned Contribution ☐ Other ___ Purpose: Reimburse for expense	104.91	104.91	7/6/04
Code ___ MITCH FOR GOVERNOR	GOVERNOR	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ___ Purpose: Contribution	100 —	100 —	9/21/04
Code ___		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ___ Purpose:			
Code ___		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ___ Purpose:			
		SUB TOTAL THIS PAGE OF SCHEDULE B	$ 684.91		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)	$ 684.91		