



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.

FILE NUMBER	2011 JAN 14 11:12:15
TOTAL PAGES IN ENTIRE CFA-4 REPORT	2

IS THIS AN AMENDMENT? Yes No

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name COMMITTEE TO ELECT KOLE	
2. Acronym or Abbreviated Name (if any) N/A	3. Committee Telephone Number (317) 709-3874
4. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address 7916 TURKEL DRIVE	
5. City, State, ZIP Code FISHERS IN 46038	6. Party Affiliation (if applicable) LIBERTARIAN

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname) MICHAEL R. KOLE (MIKE)	8. Party Affiliation or If Independent Candidate LIBERTARIAN
9. Office Sought (Include district number, if any. Not required for exploratory committee.) COUNTY COUNCIL, DISTRICT 2	10. County of Residence HAMILTON

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. Check one: <input type="checkbox"/> Pre-Primary <input checked="" type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other <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: <input type="checkbox"/> Pre-Convention <input checked="" type="checkbox"/> Post-Convention
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12. Reporting Period: From: APRIL 10, 2010 Through: OCTOBER 8, 2010	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	- 0 -	- 0 -
14. Cash on hand and investments January 1, current year.		- 0 -

CONTRIBUTIONS AND RECEIPTS

<i>(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)</i>		
15a. Itemized (use Schedule A)	400.00	400.00
15b. Unitemized	- 0 -	- 0 -
15c. Add lines 15a and 15b in both columns	SUBTOTAL	400.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	400.00

EXPENDITURES

<i>(Note: These amounts include in-kind expenditures and loan repayments.)</i>		
17a. Itemized (use Schedule B) (Public Question: use Schedule C)	- 0 -	- 0 -
17b. Unitemized	- 0 -	- 0 -
17c. Add lines 17a and 17b in both columns	SUBTOTAL	- 0 -
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	400.00
19. Debts OWED BY the committee (use Schedule D)	- 0 -	
20. Debts OWED TO the committee (use Schedule E)	- 0 -	

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.		
Signature of Treasurer	Title TREASURER	Date 1-14-2011
Signature of Candidate		Date 1-14-2011
WARNING: Any individual who files a fraudulent Campaign Finance Report is guilty of a Class A misdemeanor. (IC 3-9-4-5) A person who knowingly files a fraudulent report as required by the Indiana Campaign Finance Act (IC 3-9-4-14) 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



**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 A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY 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 individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). 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). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER _____

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. JIM HURST 1957 CAMARGUE DRIVE ZIONSVILLE IN 46077 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	150.00	150.00	8-13-10 CANDIDATE
2. AL BOTA 8435 RIVERVIEW RD BRECKSVILLE OH 44141 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	100.00	100.00	8-15-10 CANDIDATE
3. STEVE (WAINSTEAD) PAWLOWSKI 322 8 th AVE. SUITE 701 NY NY 10001 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	100.00	100.00	8-15-10 CANDIDATE
4. MARK SCHREIBER 450 N WASHINGTON ST TIFFIN OH 44883 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	50.00	50.00	8-21-10 CANDIDATE
5. Contributor's Occupation (if required) _____	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 400.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY <i>(Enter total on ITEM 15a of the Summary Sheet)</i>		\$ 400.00		