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Jeanny Baitz
CLERK, MAGISTRATE COUNTY COURTS

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 REPOR

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
Connie Pearson for Town Council

2. Acronym or Abbreviated Name *(if any)*

3. Committee Telephone Number
(317) 758-5344

4. Mailing Address *(address where all campaign finance correspondence is received)* ☐ Check if this is a new address
406 E 5th Street

5. City, State, ZIP Code
Sheridan IN 46069

6. Party Affiliation *(if applicable)*
Republican

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

7. Full Name of Candidate *(include any nickname)*
Connie Jean Pearson

8. Party Affiliation or if Independent Candidate
Republican

9. Office Sought *(include district number, if any. Not required for exploratory committee.)*
Town Council District II

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 ONL

Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting Period:
From: 4-14-07 Through: 10-12-07

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	77.80	
14. Cash on hand and investments January 1, current year.		-0-
CONTRIBUTIONS AND RECEIPTS		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		
15a. Itemized *(use Schedule A)*	430.00	1430.00
15b. Unitemized		
15c. Add lines 15a and 15b in both columns SUBTOTAL	430.00	1430.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL	507.80	1430.00
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(use Schedule B) (Public Question: use Schedule C)*	322.37	1244.57
17b. Unitemized		
17c. Add lines 17a and 17b in both columns SUBTOTAL	322.37	1244.57
18. Cash on hand and investments at close of this reporting period *(subtract 17c from 16 in both columns)* TOTAL	185.43	185.43
19. Debts OWED BY the committee *(use Schedule D)*	-0-	
20. Debts OWED TO the committee *(use Schedule E)*	-0-	

CERTIFICATION

FOR OFFICE USE ONL

Signature on File

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

Title	Date
Treasurer	10-4-07
	10-4-07

...sale or used for any commercial purpose. (IC 3-8-4-5) A person who knowingly ...ch who fails to file a complete or accurate report as required by the Indiana ...

REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE
State Form 46006 (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

Page 1 of 1

CONTRIBUTOR'S FULL NAME AND OCCUPATION 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. Connie Jean Pearson 406 E 5th Street Sheridan IN 46069 Contributor's Occupation (if required) Clerk-Treasurer	Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify)	300.00	1300.00	4-18-07 Connie Pearson Committee To Elect
2. Charles White 6994 Pintail Drive #10F Fishers, IN 46038 Contributor's Occupation (if required) Do Not Know	Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify)	100.00	1400.00	5-3-07 Connie Pearson Committee To Elect
3. Emalou Leonard E. 2nd Street Sheridan, IN 46069 Contributor's Occupation (if required) Town of Sheridan Clerk Treas. Off assist.	Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify)	30.00	1430.00	5-25-07 Connie Pearson Committee To Elect
4. Contributor's Occupation (if required)	Contributions: [ ] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify)			
5. Contributor's Occupation (if required)	Contributions: [ ] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify)			
SUBTOTAL THIS PAGE OF SCHEDULE A		$ 430.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		$ 430.00		