



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

JAMMY BAITZ
CLERK
HAMILTON COUNTY COURTS

(CFA-4) Summary Sheet

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|------------------------------------|
| FILE NUMBER |
| 2016 JAN 15 PM 3:49 |
| TOTAL PAGES IN ENTIRE CFA-4 REPORT |

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) <input type="checkbox"/> Check if this is a new name Jennifer Pickett | 3. Committee Telephone Number (317) 509-3090 |
| 2. Acronym or Abbreviated Name (if any) | 4. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address P.O. Box 208 |
| 5. City, State, ZIP Code Arcadia, IN 46030 | 6. Party Affiliation (if applicable) Republican |

CANDIDATE INFORMATION (For Candidate's Committees Only)

| | |
|---|---|
| 7. Full Name of Candidate (include any nicknames) Jennifer Sue Pickett | 8. Party Affiliation or If Independent Candidate Republican |
| 9. Office Sought (include district number, if any. Not required for exploratory committee.) Arcadia Clerk Treasurer | 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 |
|---|---|

| | | |
|---|-------------------------|--------------------------|
| 12. Reporting Period: From: 10-16-15 Through: 1-15-16 | 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

(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 | 0 | 0 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B | 0 | 0 |

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

| | | |
|---|---|---|
| 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 | 0 | 0 |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) | 0 | 0 |
| 19. Debts OWED BY the committee (use Schedule D) | 0 | 0 |
| 20. Debts OWED TO the committee (use Schedule E) | 0 | 0 |

SIGNATURE

BY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

| | |
|------------------|------------------------|
| Treasurer | Date 1-15-16 |
| | Date 1-15-16 |

is not to be used for any commercial purpose. (IC 3-9-4-5) A person who knowingly who fails to file a complete or accurate report as required by the Indiana may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICIAL USE ONLY
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