REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R12/11-04)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)
Summary Sheet

FILE NUMBER

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*) ☐ Check if this is a new name
Committee to Elect Kevin "Woody" Rider

2. Acronym or abbreviated name, if any

3. Committee telephone number
(317) 847-6970

4. Mailing address *(address where all campaign finance correspondence is received)* ☐ Check if this is a new address
1473 Second Way

5. City, state, ZIP code
Carmel In 46033

6. Party affiliation *(if applicable)*
Republican

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

7. Full name of candidate *(include any nickname)*
Kevin D. "Woody" Rider

8. Party affiliation or if independent candidate
Republican

9. Office sought *(Include district number, if any. **Not required for exploratory committee.**)*
City Council At-Large

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: 1-11-07 Through: 4-20-07

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	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)	8500.00	8500.00
15b. Unitemized	200.00	200.00
15c. Add lines 15a and 15b in both columns SUBTOTAL	8700.00	8700.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL	8700.00	8700.00
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		
17b. Unitemized	46.40	46.40
17c. Add lines 17a and 17b in both columns SUBTOTAL	46.40	46.40
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL	8653.60	8653.60
19. Debts OWED BY the committee (use Schedule D)		
20. Debts OWED TO the committee (use Schedule E)		

CERTIFICATION

Signature on File

Campaign Finance Law permits a Class B misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-15, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY

FILED
2007 APR 20 AM 9:31

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R12/11-04)
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 5

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. Bill + Jennifer Conover 10858 Sedgemoor Cir. Carmel, IN. 46032 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	100.00	100.00	1-17-07
2. Brian + Sarah Shapiro 918 S. Rangeline Rd Carmel, In. 46032 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	500.00	500.00	1-16-07
3. John + Dawn Holcombe 12506 Sandstone Run Carmel, In. 46033 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	500.00	500.00	1-4-07
4. Shiloh Crossing Ptnrs II, LLC 333 N. Pennsylvania St, 10th fl Indpls., IN. 46204 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	150.00	150.00	1-24-07
5. RK Locke + Co 3021 E. 98th St #115 Indpls., IN 46280 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	250.00	250.00	3-1-07
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 1500.00		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet)*	$		

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(CFA-4 SCHEDULE A-1)

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FILE NUMBER

Page 2 of 5

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. Roy + Jennifer Mellinger 12567 Scottish Bend Carmel, In. 46033 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc (specify)	250.00	250.00	2-28-07
2. Sara Lentz-Crouse 5872 Lake Kessler Court Indpls., In. 46226 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	200.00	200.00	3-1-07
3. Gerald + Cheryl Pedigo P.O. Box 9076 Rancho Santa Fe, CA. 92067 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	1000.00	1000.00	3-5-07
4. Phillip + Lisa Stoffregen 212 E 71st St. Indpls., IN 46220 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	1000.00	1000.00	3-6-07
5. Bruce Cordingley ONE Pedcor Square 770 3rd Ave. Southwest Carmel, In. 46032 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	1000.00	1000.00	3-7-07
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 3450.00		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet)*	$		

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE
State Form 4606 (R12/11-04)
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(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 3 of 5

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. Pershing Partners, LLC 333 N. Pennsylvania St 10th Fl Indpls., In 46204 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	500 00	500 00	3-16-07
2. B. Jo Dailey 6479 Romeo Dr Avon, In. 46123 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	100 00	100 00	4-1-07
3. Gary W. Frey P.O. Box 3549 Carmel, In. 46082 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	100 00	100 00	4-11-07
4. Thomas W. Fisher 6887 Longest Dr. Carmel, In. 46033 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	50 00	50 00	4-12-07
5. Duffy Mullen Investors Mortgage Security, Inc. 1030 Summit Dr. Carmel, In. 46032 Contributor's Occupation (if required)	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	200 00	200 00	
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 950 00		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	$		

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(CFA-4 SCHEDULE A-2)

CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS 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 corporations **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)*.

FILE NUMBER

Page 4 of 5

CONTRIBUTOR'S FULL NAME AND 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. D. Kelley Quesser 837 Wedgewood Ln. Carmel, In. 46033	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	500 00	500 00	4-16-07
2. Joseph M. Mrak 958 Chevy Chase Lane Indpls., In. 46280	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	250 00	250 00	4-17-07
3. Steven + MeLinda Johns 1711 Wood Valley Dr Carmel, In 46032	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)	100 00	100 00	4-18-07
4.	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)			
5.	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify)			
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 850 00		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)	$		

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(CFA-4 SCHEDULE A-4)

CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES 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 political action committees **OVER $100** per contributor, within a calendar year **MUST** be itemized on this schedule *(over $200, if regular party committee)*. All transfers-in and in-kind contributions regardless of amount from political action committees **MUST** be itemized on this schedule. 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)*.

FILE NUMBER
Page 5 of 5

CONTRIBUTOR'S FULL NAME AND 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. The Six-Pac P.O. Box 218 Lewisville, In. 47352	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	500.00	500.00	4-2-07
2. Work for State Representative 11944 Esty Way Carmel, In. 46033	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	250.00	250.00	4-11-07
3. Sharp for Council 1481 Stormy Ridge Ct. Carmel, In. 46032	Contributions: ☒ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	1000.00	1000.00	3-19-07
4.	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*			
5.	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*			
	SUBTOTAL THIS PAGE OF SCHEDULE A	$1750.00		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	$500.00		