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 REPORT
4

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
Citizens to Elect Melody Sweat

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

3. Committee Telephone Number
(317) 896-3064

4. Mailing Address *(address where all campaign finance correspondence is received)* ☐ Check if this is a new address
211 Mill St.

5. City, State, ZIP Code
Westfield, IN 46074

6. Party Affiliation *(if applicable)*
Republican

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

7. Full Name of Candidate *(include any nickname)*
Melody Ann Sweat

8. Party Affiliation or If Independent Candidate
Republican

9. Office Sought *(include district number, if any. **Not required for exploratory committee.**)*
Westfield City Council Dist #2

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

	COLUMN A This Period	COLUMN B Year to Date
12. Reporting Period: From: 1/1/07 Through: 12/31/07		
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. 17.14		17.14
CONTRIBUTIONS AND RECEIPTS		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		
15a. Itemized *(use Schedule A)*	952.44	952.44
15b. Unitemized	400.00	400.00
15c. Add lines 15a and 15b in both columns SUBTOTAL	1352.44	1352.44
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL	1352.44	1352.44
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(use Schedule B) (Public Question: use Schedule C)*	1067.70	1067.70
17b. Unitemized	267.60	267.60
17c. Add lines 17a and 17b in both columns SUBTOTAL	1335.30	1335.30
18. Cash on hand and investments at close of this reporting period *(subtract 17c from 16 in both columns)* TOTAL	17.14	17.14
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 on File

Title: Treasurer
Date: 1/11/08

Date: 1/11/08

not be copied for sale or used for any commercial purpose. *(IC 3-9-4-5)* A person who knowingly 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, IC 3-9-4-17, IC 3-9-4-18)*

FOR OFFICE USE ONLY

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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 1 of 2

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. Cindy Spolyaric 16131 Chancellors Ridge Noblesville, IN 46062 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* $200 Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	200	200	4/13/07 Melody Sweat
2. Jim Anderson 301 S. Union St Westfield, IN 46074 Contributor's Occupation *(if required)* Developer	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	$250	$250	4/30/07 Melody Sweat
3. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*			
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		$ 450		
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)*.

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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. Shamrock Pac 16615 Downstream Dr Noblesville, IN 46062	Contributions: [1] Direct; ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan; ☐ Misc. *(specify)*	502.44	502.44	5/7/07 Melody Sacot
2.	Contributions: ☐ Direct; ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan; ☐ Misc. *(specify)*			
3.	Contributions: ☐ Direct; ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan; ☐ Misc. *(specify)*			
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	$ 502.44		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet)*	$ 952.44		

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OF A POLITICAL COMMITTEE
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(OF A 4 SCHEDULE B)
ITEMIZED EXPENDITURES

INSTRUCTIONS: 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 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.

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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 A Harcourt Outlines 7765 S. 175 West PO Box 128 Milroy, IN 46156	Manufacturer	☐ Direct ☐ In Kind ☑ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	502.44	502.44	5/1/07
Code A 1 to One Promotions 185 Carey Drive Noblesville, IN 46060	Manufacturer	☐ Direct ☐ In Kind ☑ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	107.87	107.87	5/29/07
Code A Logo USA 320 Parkway Cir Westfield, IN 46074	Apparel shop	☐ Direct ☐ In Kind ☑ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	457.39	457.39	9/8/07
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			

SUBTOTAL THIS PAGE OF SCHEDULE B $ 1067.70

TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet)* $ 1067.70