FX 776-8218 FILED

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

2007 JA 17 AM 11:55

State Form 46006 (R/3/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)
Summary Sheet

Tammy Baitz

FILE NUMBER

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.

CLERK, HAMILTON COUNTY COURTS

TOTAL PAGES IN ENTIRE CFA-4 REPORT

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
Winckler for Clay Township Trustee

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number
317 573-9965

4. Mailing Address (address where all campaign finance correspondence is received) ☐ Check if this is a new address
411 Jenny Ln

5. City, State, ZIP Code
Carmel IN 46032

6. Party Affiliation (if applicable)
Democrate

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)
Henry Winckler

8. Party Affiliation or If Independent Candidate
Democrate

9. Office Sought (include district number, if any. Not required for exploratory committee.)
Clay Twsp Trustee

10. County of Residence
Hamilton Co.

TYPE OF REPORT

11. Check one.
☐ Pre-Primary ☑ Pre-Election ☐ Annual ☐ Nomination ☐ Other _____
☐ Final/Discards 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: 4-7-06 Through: 1-17-07		
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) 15a) [redacted]	[redacted]	[redacted]
15b. Unitemized	[redacted]	[redacted]
15c. Add lines 15a and 15b in both columns [redacted] 2514 SUBTOTAL	[redacted]	[redacted]
16. Add lines 13 and 15c in Column A and lines [redacted] in Column B TOTAL		15c)
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized (use Schedule B) (Public Question: use Schedule C) 1789	1526	1526
17b. Unitemized	[redacted]	[redacted]
17c. Add lines 17a and 17b in both columns 1789 SUBTOTAL	1844	1844
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL	0	0
19. Debts OWED BY the committee (use Schedule D)	0	
20. Debts OWED TO the committee (use Schedule E)	0	

15a) 780
~~755~~
2489 700
2514
780
1789
Previous Report

CERTIFICATION

FOR OFFICE USE ONLY

Signature on File

Tammy Baitz

FILED 2007 JA 17 AM 11:55

2007-01-17 12:52 HENRYWINCKLER 3175739965 >> P.1/3

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 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 _____ of _____

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. John F Sullivan Jr P.O. Box 479 Carmel, IN 46082-0479 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	600.00/100	1	10/15/06 H Winckler
2. Retention of Judge Pyle Committee 12999 Regent Cir. Carmel, IN 46032 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Misc. *(specify)*	100.00/100		10-20-06 H Winckler
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		$		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet)*		$		

2007-01-17 12:52 HENRYWINCKLER 3175739965 >>

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 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.

FILE NUMBER

Page _____ of _____

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 ____ Kinkos 530 E. Carmel Dr Carmel, IN 46032	H Winckler 411 Jennyhu Carmel IN 46032 Clay twnsp Trustee	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	582-		10/30/07
Code ____ Indy Star 307 N Pennsylvania Indpls, IN 46204	" " " "	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	807-		10/30/07
Code ____ Indy Star 307 N. Pennsylvania Indpls, IN 46204	" " " "	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	137.~~40~~		10/31/07
Code ____ Spotlight TV Indpls ~~411~~ P.O. Box 643315 Cincinnati, OH 45264	" " " "	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	~~+326~~ 263.5		10/31/07
Code ____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	~~+789~~		
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	$		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet)*	$		