# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R11/12-03)
Indiana Election Commission (IC 3-9-5-14)
Approved by State Board of Accounts 1999

**(CFA-4) Summary Sheet**

**FILE NUMBER** 3546

**TOTAL PAGES IN ENTIRE CFA-4 REPORT** 11

*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
GREGORY W PORTER for STATE REPRESENTATIVE DISTRICT #96

2. Acronym or abbreviated name, if any

3. Committee telephone number
(317) 926-1179

4. Mailing address *(address where all campaign finance correspondence is received)* ☐ Check if this is a new address
3614 N. Pennsylvania

5. City, state, ZIP code
Indianapolis, Indiana 46205

6. Party affiliation *(if applicable)*
Democratic

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

7. Full name of candidate *(include any nickname)*
GREGORY W PORTER

8. Party affiliation or if independent candidate
Democratic

9. Office sought *(include district number, if any. Not required for exploratory committees.)*
STATE REPRESENTATIVE DISTRICT 96

10. County of residence
MARION

## 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: October 9, 2004 Through: December 31, 2004

| | COLUMN A This Period | COLUMN B Year to Date |
|---|---|---|
| 13. Cash on hand and investments at the beginning of this reporting period. | 40950.90 | |
| 14. Cash on hand and investments January 1, current year. | | 31329.16 |
| **CONTRIBUTIONS AND RECEIPTS** | | |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) | | |
| 15a. Itemized (use Schedule A) | 13500.00 | 35600.00 |
| 15b. Unitemized | 0.00 | 429.00 |
| 15c. Add lines 15a and 15b in both columns SUBTOTAL | 13500.00 | 36029.00 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL | 54450.90 | 67358.16 |
| **EXPENDITURES** | | |
| (Note: These amounts include in-kind expenditures and loan repayments.) | | |
| 17a. Itemized (use Schedule B) (Public Question: use Schedule C) | 19267.73 | 29670.03 |
| 17b. Unitemized | 7656.30 | 10161.30 |
| 17c. Add lines 17a and 17b in both columns SUBTOTAL | 26924.07 | 39831.33 |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL | 27526.83 | 27526.83 |
| 19. Debts OWED BY the committee (use Schedule D) | | |
| 20. Debts OWED TO the committee (use Schedule E) | | |

## CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

| Signature of Treasurer | Title | Date |
|---|---|---|
| Loretta Porter | Treasurer | 1/18/2005 |
| Signature of Candidate *(if applicable)* | | Date 1/18/2005 |

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 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**
05 JAN 19 AM 8:12
MARION COUNTY CLERK

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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: 3546

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. JOSEPH E LOFTIS JR<br>5901 William Conner Way<br>CARMEL, IN 46033<br>Contributor's Occupation (if required): ATTORNEY | Contributions: [X] Direct [ ] In-Kind (describe)<br>Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) ATTORNEY | 100- | 100- | 10-22 ~~12~~-1-04<br>GREG Porter |
| 2. James IRSAY<br>7001 W. 56th Street<br>Indianapolis<br>Contributor's Occupation (if required): BUSINESS OWNER | Contributions: [ ] Direct [ ] In-Kind (describe)<br>Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 400- | 400- | 10-22-04<br>Greg Porter |
| 3. DR SHELVY KEGLAR<br>9208 FORDHAM ST.<br>Indianapolis, IN 46288<br>Contributor's Occupation (if required): PSYCHOLOGIST | Contributions: [X] Direct [ ] In-Kind (describe)<br>Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 300 | 300 | 10-22-04<br>Greg Porter |
| 4. MATTHEW GUTWEIN<br>859 WOODRUFF PL WDR<br>Indianapolis, 46201<br>Contributor's Occupation (if required): CEO HEALTH CARE | Contributions: [X] Direct [ ] In-Kind (describe)<br>Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 300 | 300- | 10-28-04<br>Greg Porter |
| 5. IM JEAN RICHCREEK<br>3127 N. Pennsylvania<br>INDPLS, IN 46205<br>Contributor's Occupation (if required): Utility Exec. | Contributions: [X] Direct [ ] In-Kind (describe)<br>Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 200- | 200- | 10-29-04<br>GREG PORTER |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | $ 1300.00 | | |
| 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-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: 3546

Page 1 of 1

| 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 BAKER & DANIELS 300 N. Meridan St. 2700 Indianapolis, IN 46204 | Contributions: [X] Direct [ ] In-Kind (describe) ____ Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) ____ | 250- | 250- | 10-29-04 / Greg Porter |
| 2 Altria Corporate Services 400 technecenter Dr Ste 302 Milford, Ohio 45150 | Contributions: [X] Direct [ ] In-Kind (describe) ____ Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) ____ | 200- | 200- | 10-29-04 / Greg Porter |
| 3 CASH AMERICA 1600 W 7th Street Ft. Worth TX 76102 | Contributions: [X] Direct [ ] In-Kind (describe) ____ Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) ____ | 300 | 300- | 10-29-04 / Greg Porter |
| 4 THE OUTDOOR ADVERTISING ASSOC OF INDIANA INC. 5363 ROYAL TRDON WAY AVON, IN 46223 | Contributions: [X] Direct [ ] In-Kind (describe) ____ Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) ____ | 250- | 250- | 10-29-04 / Greg Porter |
| 5 | Contributions: [ ] Direct [ ] In-Kind (describe) ____ Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) ____ | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | $ 1000 | | |
| 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: 3546

Page 1 of 4

| 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 Indiana AGRI-BUSINESS PAC<br>135 N. Pennsylvania Ste 2350<br>Indianapolis, IN 46204 | Contributions: [X] Direct [ ] In-Kind (describe)<br>Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 300 | 300 | 10-29-04<br>GREG PORTER |
| 2 AMERICAN ELECTRIC POWER<br>Committee for Responsible GOVERNMENT<br>101 W Ohio Street STE 1320<br>INDPLS, IN 46204 | Contributions: [X] Direct [ ] In-Kind (describe)<br>Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 250 | 250 | 10-29-04<br>GREG PORTER |
| 3 IPCA-PAC<br>Indiana Petroleum MARKETERS<br>Convience STORE ASSOCIATION<br>101 W. WASHINGTON ST STE. 1338E<br>INDPLS, IN 46204 | Contributions: [X] Direct [ ] In-Kind (describe)<br>Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 250 | 250 | 10-29-04<br>GREG PORTER |
| 4 UNITED TRANSPORTATION UNION PAC<br>14600 DETROIT AVENUE<br>CLEVELAND, OHIO 44107 | Contributions: [X] Direct [ ] In-Kind (describe)<br>Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 150 | 150 | 10-29-04<br>GREG PORTER |
| 5 ENTERPRISE RENT-A-CAR PAC<br>600 CORPORATE PARK DRIVE<br>SAINT LOUIS, MO 63105 | Contributions: [ ] Direct [ ] In-Kind (describe)<br>Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 100 | 100 | 10-29-04<br>GREG PORTER |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | $ 1050.00 | | |
| 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: 3546

Page 2 of 4

| 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. PFIZER-PAC-STATE 235 EAST 42nd Street NEW YORK, NY 10017 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 250- | 250- | 10-29-04 / GREG Porter |
| 2. IPACE 150 WEST MARKET ST Ste200 INDPLS, IN 46204 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 3000 | 7000 | 10/29/04 / Greg Porter |
| 3. FRIENDS OF Indiana Hosp ONE AMERICAN Sq. Ste 1900 Indpls, IN 46282 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 1000- | 1,500 | 10-29-04 / GREG PORTER |
| 4. INSURANCE PAC 201 N. ILLINOIS STE 1410 Indpls, IN 46204 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 500 | 500 | 10-29-04 / GREG PORTER |
| 5. Indiana DENTAL PAC c/o Raymond M MADDOX DDS 1200 N. WALNUT ST. HARTFORD CITY, IN 47348 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 300- | 300- | 10-29-04 / GREG PORTER |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | $ 5050.00 | | |
| 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

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FILE NUMBER: 3546

Page 3 of 4

| 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. Indianapolis Chamber of Comm. 320 N. Meridian St 200 Indianapolis, In 46204 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 500- | 500- | 12-1-04 / Greg Porter |
| 2. Friends of Indiana Hospitals One American Sq. Indianapolis, IN 46282 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 1000- | 1000- | 10-22-05 / Greg Porter |
| 3. IPACE 150 W. Market St. Ste 900 Indianapolis, IN 46204 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 3000 | 7000 | 10-22-05 / Greg Porter |
| 4. Indiana Health Care PAC One Capitol Ave Ste 1115 Indianapolis, IN 46204 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 300- | 300- | 10-29-04 / Greg Porter |
| 5. Indiana Title Political A.C. P.O Box 20896 Indianapolis, IN 46220 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 200- | 200- | 10-29-04 / G Porter |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | $ 5000.00 | | |
| 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

1

**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** 3546

Page 4 of 4

| 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. I.A.H.P. PAC<br>1N CAPITAL AVE STE 330<br>INDPLS, IN 46204 | Contributions: ☒ Direct ☐ In-Kind (describe)<br>Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) | 100 — | 100 — | 10-29-04<br>GREG PORTER |
| 2. | Contributions: ☐ Direct ☐ In-Kind (describe)<br>Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) | | | |
| 3. | Contributions: ☐ Direct ☐ In-Kind (describe)<br>Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) | | | |
| 4. | Contributions: ☐ Direct ☐ In-Kind (describe)<br>Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) | | | |
| 5. | Contributions: ☐ Direct ☐ In-Kind (describe)<br>Other Receipts: ☐ Interest ☐ Loan ☐ Misc. (specify) | | | |
| | SUBTOTAL THIS PAGE OF SCHEDULE A | $ 100.00 | | |
| | TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet)* | $ 13500.00 | | |

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# (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: 3546

Page 1 of 4

| 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<br>RADIO ONE<br>617 Indiana Avenue<br>Indpls, IN 462 | | ☒ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Advertisement | 800- | 800- | 10/22/04 |
| Code A<br>Indiana House Demo<br>One North Capitol Dr<br>INDPLS, IN 46204 | | ☒ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Contribution | 3000 | 16,000 | 10/28/04 |
| Code A<br>Jesus On My Mind<br>3605 Richelieu Rd<br>Indpls, IN 46228 | | ☒ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Advertising | 1,300- | 1,300- | 10/29/04 |
| Code A<br>LABOR NEWS, INC<br>1701 W. 18th Street<br>Indpls, IN 46202 | | ☒ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Advers. | 295- | 295- | 10/28/04 |
| Code A<br>Indiana Herald News<br>2100 N. Illinois<br>INDPLS, IN 46204 | | ☒ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Advertising | 468.75 | 468.75 | 10/28/04 |
| Code O<br>NATIONAL BLACK CAUCUS OF STATE LEGISLATORS<br>NBCSL<br>444 No. Capitol St<br>Washington DC 20001 | | ☒ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | 350- | 350- | 11/30/04 |
| Code C<br>Mirical on 38th St<br>100 W 38th Street<br>Indpls, IN 46208 | | ☒ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Contribution | 100- | 100- | 11/30/04 |
| | | SUBTOTAL THIS PAGE OF SCHEDULE B | $6313.75 | | |
| | | TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet)* | $ | | |

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# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

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FILE NUMBER: 3546

Page 2 of 4

| 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 C<br>RAY BAKER FOR ADVISORY BOARD<br>55 Highland Ct<br>Indpls, IN 46228 | WASHINGTON TOWNSHIP ADVISORY BD. | ☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other<br>Purpose: Contribution | 150- | | 10/20/04 |
| Code O<br>SHARNICE SHAW<br>1912 Sextant Way<br>INDPLS, IN 46280 | | ☒ Direct ☐ In-Kind ☒ Payment of Debt ☐ Returned Contribution ☐ Other<br>Purpose: Computer Upgrade | 200- | 200- | 10/20/04 |
| Code C<br>Indiana House Dems<br>One North Capitol<br>Indianapolis, IN 46204 | | ☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other<br>Purpose: Contribution | 5000 | 10,000 | 10/20/04 |
| Code F<br>Vicki Williams<br>1116 W. 36th St<br>Indianapolis, IN 46208 | | ☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Fundraising<br>Purpose: CATOR | 400 | 400- | 10/21/04 |
| Code C<br>ACKLES FOR CORNER<br>603 E Washington St 400<br>Indianapolis, IN 46204 | MARION COUNTY CORNER | ☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other<br>Purpose: Contribution | 200- | 200- | 10/21/04 |
| Code A<br>Indiana Recorder<br>2901 N Tacoma<br>Indpls, IN 46218 | | ☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other<br>Purpose: Advist | 480 | 480 | 10/28/04 |
| Code C<br>IHDC<br>ONE NORTH CAPITAL<br>INDPLS, IN 46204 | | ☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other<br>Purpose: Contribution | 3000- | 13,000 | 10/21/04 |
| | | **SUBTOTAL THIS PAGE OF SCHEDULE B** | $9430.00 | | |
| | | **TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY** *(Enter total on ITEM 17a of the Summary Sheet)* | $ | | |

**REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE**
State Form 4606 (R11/12-03)
Indiana Election Commission (IC 3-9-5-14)
Approved by State Board of Accounts 1999

# (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: 3546

Page 3 of 4

| 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<br>Volunteers<br>PO Box 399<br>Jeffersonville, IN 47131 | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Advis Signs | 1,118.30 | 1,118.30 | 10/28/04 |
| Code A<br>Marion County Demo Party 200 E. Washington Street<br>Indpls, IN 46204 | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Contribution | 250- | 250- | 10/26/04 |
| Code C<br>Barron Hill Congress<br>P.O. Box 1071<br>Seymour, IN 47274 | US Congress | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Contribution | 250 | 250 | 10/28/04 |
| Code O<br>American Express<br>P.O. Box 360001<br>Ft Lauderdale FL 33336 | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | 300- | 300- | 10/28/04 |
| Code O<br>Sprint<br>P.O. Box 740602<br>Cincinnati OH 45274 | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | 118.72 | | 10/28/04 |
| Code C<br>Wishard Foundation<br>1001 W. 10th Street, Myers Bldg.<br>Indpls, IN 46202 | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | 125- | 125- | 10/29/04 |
| Code 4<br>David Szemcie<br>23 S. Oxford<br>Indpls, IN 46201 | | ☒ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Printing | 762 | 980.70 | 10/28/04 |
| | | **SUBTOTAL THIS PAGE OF SCHEDULE B** | $ 2924.02 | | |
| | | **TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY** *(Enter total on ITEM 17a of the Summary Sheet)* | $ | | |

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# (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: 3546

Page 4 of 4

| 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 C<br>Smoking Good Soul Fund<br>2810 East 38th St.<br>Indianapolis, IN 46205 | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Contribution | 100- | 100- | 10/28/04 |
| Code C<br>Supporter For Sutton<br>P.O. Box 1287<br>Evansville, IN 47706 | County OFFICE | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: Contribution | 500- | 500- | 10/28/04 |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| | | **SUBTOTAL THIS PAGE OF SCHEDULE B** | $600.00 | | |
| | | **TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY** *(Enter total on ITEM 17a of the Summary Sheet)* | $19267.77 | | |