



# 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

32-05-009

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<br>RONNIE AUSTIN FOR TOWNSHIP TRUSTEE        |  |
| 2. Acronym or Abbreviated Name (if any)   | 3. Committee Telephone Number<br>(317) 212-1855 / 317-351-0708 |
| 4. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address<br>5062 BRAEMAR ST |  |
| 5. City, State, ZIP Code<br>AVON, IN 46123  | 6. Party Affiliation (if applicable)<br>REPUBLICAN             |

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

|  |  |
|--|--|
| 7. Full Name of Candidate (include any nickname)<br>RONNIE AUSTIN  | 8. Party Affiliation or If Independent Candidate<br>REPUBLICAN |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.)<br>WASHINGTON TOWNSHIP TRUSTEE | 10. County of Residence<br>HENDRICKS                           |

### TYPE OF REPORT

### CONVENTION CANDIDATES ONLY

|   |   |
|---|---|
| 11. Check one:<br><input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other<br><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:<br><input type="checkbox"/> Pre-Convention<br><input type="checkbox"/> Post-Convention |
|---|---|

|   |                         |                          |
|---|-------------------------|--------------------------|
| 12. Reporting Period:<br>From: 1-1-09 Through: 12-31-09                     | COLUMN A<br>This Period | COLUMN B<br>Year to Date |
| 13. Cash on hand and investments at the beginning of this reporting period. | 515.05                  |                          |
| 14. Cash on hand and investments January 1, current year.                   |                         |                          |

### CONTRIBUTIONS AND RECEIPTS

|   |          |         |
|---|----------|---------|
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) |          |         |
| 15a. Itemized (use Schedule A)  |          |         |
| 15b. Unitemized   | 1,500.00 |         |
| 15c. Add lines 15a and 15b in both columns  |          |         |
| SUBTOTAL  |          |         |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B                         | TOTAL    | 2015.05 |

### EXPENDITURES

|   |       |         |
|---|-------|---------|
| (Note: These amounts include in-kind expenditures and loan repayments.)                                   |       |         |
| 17a. Itemized (use Schedule B) (Public Question: use Schedule C)  |       |         |
| 17b. Unitemized   |       |         |
| 17c. Add lines 17a and 17b in both columns  |       |         |
| SUBTOTAL  |       |         |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) | TOTAL | 2015.05 |
| 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    |
| [Signature]   |       | 1-20-09 |
| Signature of Candidate (if applicable)  |       | Date    |
| [Signature]   |       | 1-20-10 |

FOR OFFICE USE ONLY



**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 1 of 1

| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br><i>street, number city, state ZIP code</i>          | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED<br>RECEIVED BY |
|---|---|-----------------------------------|--|---------------------------------|
| 1. Martha O'Conner<br>333 Massachusetts Ave<br>#607<br>Indpls, IN 46204<br><br>Contributor's Occupation (if required) | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) | 500.00                            |  |                                 |
| 2. Rick Conner<br>7260 Lands End Circle<br>Noblesville, IN 46062<br><br>Contributor's Occupation (if required)        | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) | 500.00                            |  |                                 |
| 3. Barnes & Thornburg, LLP<br><br>Contributor's Occupation (if required)  | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) | 250.00                            |  |                                 |
| 4. Edwards Rigdon<br><br>Contributor's Occupation (if required)   | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) | 250.00                            |  |                                 |
| 5.<br><br>Contributor's Occupation (if required)  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)            |                                   |  |                                 |
| SUBTOTAL THIS PAGE OF SCHEDULE A  |   | \$1,500.00                        |  |                                 |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY  |   |                                   |  |                                 |