

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R17 / 8-23) Indiana Election Division (IC 3-9-5-14)

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? Ves No

Signature of Candidate (if applicable)

(CFA-4) **Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

THE RESERVE OF THE PARTY OF THE	COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization) Check if this is a new name. Elect David Ernst for Town Council		name.	7	1886
2. Acronym or Abbreviated Name (if any)		3. Commi	ttee Telephone Number	LO
		() ~ ~ ,	
4. Mailing Address (Address where all campaign finance correspondence is received.) 4. Mailing Address (Address where all campaign finance correspondence is received.) Check if this is a new address Check if this is a new addre				
5. City, State, ZIP Code Clayton, IN. 46118			ffiliation (if applicable)	: C
CANDIDATE INFORMATION (For Candidate's Committees Only)				
7. Full Name of Candidate (Include any nickname.) David Michael Ernst	8. Party Affiliation Republican		ffiliation or If Independe	ent Candidate
9. Office Sought (Include district number, if any. Not required Clayton Town Council	10. County of Residence Hendricks			
TYPE OF	REPORT	1	CONVENTIO	ON CANDIDATES ONLY
11. Check one: Pre-Primary Pre-Election Annual Nomination Other Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend Statement of Organics)			Check one: Pre-Convention Post-Convention	
12 Reporting Period (mm/dd/yy):				001.11111.0
From: 01/12/23 Throu	_{ugh:} 10/17/23		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			31.50	
14. Cash on hand and investments January 1, current year.				31.50
CONTRIBUTIONS AN		7.20		THE RESERVE
(Note: these amounts include in-kind contributions and loa	ns, as well as cash contributions.)	- 1		
15a. Itemized (Use Schedule A.)			0	0
15b. Unitemized			0	0
15c. Add lines 15a and 15b in both columns. SUBTOTAL			31.50	0
16. Add lines 13 and 15c in Column A and lines 14 and 15		TOTAL	31.50	31.50
EXPENDITUR				
(Note: These amounts include in-kind expenditures and loa			STATE OF THE R	ALTERNATION OF THE PARTY OF THE
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			0	0
17b. Unitemized			0	0
17c. Add lines 17a and 17b in both columns.			0	0
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)			0	0
19. Debts OWED BY the committee (Use Schedule D.)			0	
20. Debts OWED TO the committee (Use Schedule E.)			0	
CERTIFICATION FOR OFFICE USE ONLY				
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	Treasurer Treasurer	Dat	e (<i>mm/dd/yy</i>) 10/17/2023	

Date (mm/dd/yy) 10/17/2023 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 Level 6 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)