

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R18 / 6-25) Indiana Election Division (IC 3-9-5-14) (CFA-4) Summary Sheet

FILE NUMBER

32-25-037

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 Д No				
COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization) Check if this is a new FRI ends of Beth HARVEN	name,			
Acronym or Abbreviated Name (if any)	3. Committee Tele	phone Number 31-365	3	
4. Mailing Address (Address where all campaign finance correspondence is received.) Check if this is a new address.				
5. City, State, ZIP Code DANVILLE, In 46122	1/	6. Party Affiliation (if applicable) KEPUDLICAN		
CANDIDATE INFORMATION (For Candidate's Committees Only)				
7. Full Name of Candidate (Include any nickname.)	1 1	Party Affiliation or If Independent Candidate Kepubli (A)		
9. Office Sought (Include district number, if any). Not required for exploratory committee.)	10. County of Resi	dence CRICKS		
TYPE OF REPORT		CONVENTION C	ANDIDATES	ONLY
1. 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 Organical Committee)		Check one: Pre-Convent Post-Conver		
	tement of Organization.)	T ost-conver	MIOTI	
12. Reporting Period (mm/dd/yy): From: 112025 Through: 121312025		LUMN A s Period	COLUMN Year to Da	
13. Cash on hand and investments at the beginning of this reporting period.		\mathcal{I}		
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.)		EXCELLENCE OF		
15a. Itemized (Use Schedule A.))	0	
15b, Uniternized	Ş	2	0	
15c. Add lines 15a and 15b in both columns.	TOTAL)	0	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	D	0	
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	ව		0	
17b. Unitemized	ć)	Ö	
17c. Add lines 17a and 17b in both columns.	STOTAL (2	0	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL (2)		0	
19. Debts OWED BY the committee (Use Schedule D.)	6)		
20. Debts OWED TO the committee (Use Schedule E.)	C			
		500	OFFICE HEE	ONI V
CERTIFICATION	TRUE CORRECT AND C		OFFICE USE	ONLT
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS I If a Treasurer of a PAC: I have not knowingly or willfully received, solicited, or accepted, either directly or indirectly, co foreign national that exceeds \$50,000 within the four (4) years immediately preceding the date of the contribution.	ntributions or expenditure			
Signature of Treasurer Title	Date (mm/d) 92 (q(\nabla))	21	
Signature of Candidate (if applicable)	Date (mm/d	\$2606	2025 DEC 2:	E
WARNING: Any information contained in this legart 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)				