



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4) Summary Sheet

FILE NUMBER

32-15-008

TOTAL PAGES IN ENTIRE CFA-4 REPORT

1-2

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. Committee to Elect Ann Hathaway 3. Committee Telephone Number 2. Acronym or Abbreviated Name (if any) (317) 459-5920 4. Mailing Address (Address where all campaign finance correspondence is received.) Check if this is a new address. 19 Carnaby Ct 5. City, State, ZIP Code 6. Party Affiliation (if applicable) Brownsburg, IN 46112 Republican CANDIDATE INFORMATION (For Candidate's Committees Only) 8. Party Affiliation or If Independent Candidate 7. Full Name of Candidate (Include any nickname.) Republican Ann Rita Hathaway 9. Office Sought (Include district number, if any. Not required for exploratory committee.) 10. County of Residence Hendricks Clerk-Treasurer TYPE OF REPORT **CONVENTION CANDIDATES ONLY** 11. Check one: Check one: Pre-Primary Pre-Election Annual Nomination Other Pre-Convention Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend Statement of Organization.) Post-Convention 12. Reporting Period (mm/dd/yy): **COLUMN A** COLUMN B Through: 10/11/19 From: 4/13/19 This Period Year to Date 13. Cash on hand and investments at the beginning of this reporting period 100.00 14. Cash on hand and investments January 1, current year. 0.00 **CONTRIBUTIONS AND RECEIPTS** (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) 15a. Itemized (Use Schedule A.) 100.00 15b. Unitemized 15c. Add lines 15a and 15b in both columns. SUBTOTAL 0.00 100.00 16 Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL 100.00 100.00 **EXPENDITURES** (Inote: These amounts include in-kind expenditures and loan repayments.) 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17b. Unitemized SUBTOTAL 0.00 17c. Add lines 17a and 17b in both columns. 0.00 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 100.00 TOTAL 100.00 226,71 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 Treaturer Laws and	Title Treasurer	Date (mm/dd/yy) 10/16/19				
Signature of Candibale (if applicable)		Date (mm/dd/yy) 10/16/19				
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 falls 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



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(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

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. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED (mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
LENDER'S OCCUPATION:		Bal of loan from 2015 campaign	0/0/10	ψ0.00	φ120.71
Ann Hathaway 19 Carnaby Ct Brownsburg, IN 46112		\$100.00	3/20/19	\$100.00	\$100.00
		To open 2019 campaign fund			
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
				F SCHEDULE D	\$ 226.71
	TOTAL OF ALL	PAGES OF SCHEDULE (Enter total on 17			\$ 226.71