

State Form 4606 (R14 / 10-17) Indiana Election Division (IC 3-9-5-14) (CFA-4)

Summary	Sheet
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FILE NUMBER

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

32-20-0013 **TOTAL PAGES IN ENTIRE CFA-4 REPORT**

4

COMMITTEE INFORMATIO	ON	S DY TOP	St. King and	
Full Name of Committee (as on Statement of Organization) Check if this is a r	new name.			
Joe Walsh Campaign				
2. Acronym or Abbreviated Name (if any)	3. Co		phone Number	
		317) 935	5-4043	
4. Mailing Address (Address where all campaign finance correspondence is received.) 640 Thornburg Pkwy	Check i	f this is a new	address.	
5. City, State, ZIP Code Brownsburg, IN, 46112	72.3	arty Affiliation nocrat	(if applicable)	
CANDIDATE INFORMATION (For Candidate			10 16 16 16 16 16 16 16 16 16 16 16 16 16	
7. Full Name of Candidate (Include any nickname.)	777 12 12 12 12 12 12 12 12 12 12 12 12 12	Charles of the latest of the l	or If Independent	Candidate
Joseph Michael Walsh		nocrat	or it independent	Candidate
Office Sought (Include district number, if any. Not required for exploratory committee.)		County of Res	idence	
Hendricks County Commissioner District 2		ndricks		
TYPE OF REPORT			CONVENTION	CANDIDATES ONLY
11. Check one:			Check one:	
Pre-Primary Pre-Election Annual Nomination Other			Pre-Conve	ntion
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amen	nd Statement of	Organization.)	Post-Conve	ention
12. Reporting Period (<i>mm/dd/yy</i>): From: 04/11/20 Through: 10/09/20			LUMN A s Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		70.00		
14. Cash on hand and investments January 1, current year.				0.00
CONTRIBUTIONS AND RECEIPTS				200100
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		26.75.00		
15a. Itemized (Use Schedule A.)			1,721.42	1,806.42
15b. Unitemized	LIDTOTAL		520.00	530.00
Too. That lines to a site to be site to be a	SUBTOTAL		2,241.42	2,336.42
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL		2,311.42	2,336.42
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)		V WASH		4.007.44
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			1,912.11	1,937.11
17b. Unitemized	SUBTOTAL		180.67 2,092.78	180.67 2,117.78
Tre, Add lines Tre dille Tre line seems.			218.64	218.64
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	IOTA		0.00	210.04
19. Debts OWED BY the committee (Use Schedule D.)			0.00	Mask State of English
20. Debts OWED TO the committee (Use Schedule E.)				0.00
				R OFFICE LISE ONLY

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE Date (mm/dd/yy) Signature of Treasurer Title Date (mm/dd/yy) Signature of Candidate (if applicable) 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)





State Form 4606 (R14 / 10-17) Indiana Election Division (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 ITLM 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 four 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							
32-20-0013							
Page	2	of	4				

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)	OR OTHER RESEIFT	PERIOD	YEAR-TO-DATE	RECEIVED BY
_{1.} George Reed 10481 Lookout Lane Indianapolis, IN 46234	Contributions Direct In-Kind (describe)			10/04/20
Contributor's Occupation (if required)	Other Receipts [] Interest [] Loan [] Miscellaneous (specify)	\$420.00	\$480.00	Joe Walsh
2 Meghan Stritar 6730E County Rd 30 N Brownsburg, IN 46112	Contributions Direct In-Kind (describe)	···		04/15/20
Contributor's Occupation (if required)	Other Receipts Interest Laan Miscellaneous (specify)	\$100.00	\$100.00	Joe Walsh
3. Stanley Albaugh 2123 Woodcreek Dr Avon, IN 46123	Contributions Direct In-Kind (describe)	¢400.00	£400.00	08/16/20
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	Joe Walsh
4. Joseph Walsh 640 Thornburg Pkwy Brownburg, IN 46112	Contributions Direct In-Kind (describe)			10/09/20
Contributor's Occupation (if required)	Other Receipts Interest I Loan Miscellaneous (specify)	\$426.42	\$451.42	Joe Walsh
5. Cheryl McCormack	Contributions ☑ Direct ☐ In-Kind (describe)	#400.00	\$400.00	09/19/20
Contributor's Occupation (if required)	Other Receipts Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	Joe Walsh
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 1,146.42		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM	A ON THE LAST PAGE ONLY 1 15a of the Summary Sheet.)	\$		



State Form 4606 (R14 / 10-17) Indiana Election Division (IC 3-9-5-14)

(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						
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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Cantributions. Direct			
	In-Kind (describe)			
	The same (assessing)			
	Other Receipts.			
	Interest Loan			
	Miscellaneous (specify)			<u> </u>
2.	Contributions.			
	Direct			
	In-Kind (describe)			
	Other Receipts: Interest Loan			
	Miscellaneous (specify)			
	Contributions:			
3.	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
4.	Contributions:			
	☐ Direct☐ In-Kind (describe)			
	III-Killa (describe)			
	Other Receipts:			
	interest Loan			
	Miscellaneous (specify)			
5.	Contributions.			
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
SURTOTA	L THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDUL				
(Enter total on IT)	EM 15a of the Summary Sheet.)	\$		



State Form 4606 (R14 / 10-17) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS 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 ITFM 15a of the Summary Sheet. All
cumulative contributions from labor organizations 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						
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Page	of					

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
	(street, number, city, state, ZIP code)	OR OTHER RESERVE	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Miscellaneous (specify)			
2.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Miscellaneous (specify)			
3.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Miscellaneous (specify)			
4.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Miscellaneous (specify)			
5.		Contributions: Direct In-Kınd (describe)			
		Other Receipts: Interest Loan Miscellaneous (specify)			
	SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 0.00		
	TOTAL OF ALL PAGES OF SCHEDULE		\$		



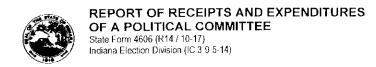
(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

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 FIEM 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 contribution, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER						
32-20-0013						
Page	3	of	4			

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OK OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1. Hendricks County Democratic Boosters 7594 Brickmaker Court Plainfield, IN 46168	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$575.00	\$575.00	09/15/2020 Joe Walsh
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts. Interest Loan Miscellaneous (specify)			
4.	Contributions. Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
	THIS PAGE OF SCHEDULE A	\$ 575.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITER	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$ 2,143.63		



(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND 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 other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, it regular party committee). All transfers in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party 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 it regular party committee).

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(CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(5	street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1.		Contributions. Direct			
		In-Kind (describe)			
		Other Receipts:			
		☐ Interest ☐ Loan			
		Miscellaneous (specify)			
2.		Contributions:			
		Direct			
		In-Kind (describe)			
		Other Receipts			
		Interest Loan			
		Miscellaneous (specify)			
3.	· · · · · · · · · · · · · ·	Contributions:			
		Direct			
		In Kind (describe)			
		Other Receipts:			
		☐ Interest ☐ Loan ☐ Miscellaneous (specify)		:	
		Miscellaneons (specify)			
-:		0 - 4-1-1-4			
4.		Contributions: Direct			
		In-Kınd (describe)			
		West 1		,	
		Other Receipts.			
		Interest Loan			
		Miscellaneous (specify)			
		Contribution of the contri			
5.		Contributions: Direct			
		In-Kind (describe)			
		Other Receipts:			
		Interest [] Loan			
		Miscellaneous (specify)			
			_		
		THIS PAGE OF SCHEDULE A	\$ 0.00		
	TOTAL OF ALL PAGES OF SCHEDULE		\$		
	(Enter total on ITEN	f 15a of the Summary Sheet.)	l ,		



State Form 4606 (R14 / 10-17) Indiana Election Division (IC 3-9-5-14

(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 Surmary 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	NUMB	ER		
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RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION TYPE OF EXPENDITURE		COLUMN A AMOUNT THIS	COLUMN B	DATE OF
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
Code A MyCampaignStore.com 304 Whittington Pkwy STE 201 Louisville, KY 40222	Yard Signs, Business Cards, Door Hangers	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$1,268.46	\$1,268.46	09/22/20
Gode A GoDaddy.com 14455 N Hayden Rd STE 219 Scottsdale, AZ 85260	Website	☑ Direct ☐ In-Kind ☐ Payment of Dobt ☐ Returned Contribution ☐ Other Purpose:	\$125.00	\$150.00	09/21/20
Code A Facebook 1 Hacker Way Menio Park, CA 94025	Digital Ads	☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$518.65	\$518.65	10/09/20
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		☐ Direct ☐ In Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	,		
Code		Direct In Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG		\$ 1,912.11		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON THI (Enter total on ITEM 17a of t		\$ 1,937.11		



(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

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. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

FILE NUMBER	
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PUBLIC QUESTIO	N INFORMATION					
Enter Text of Public Question.						
Type of Question: Statewide Local						
Position: Supported Opposed						
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)		
Code	☐ Direct ☐ In-Kind					
	Returned Contribution					
	☐ Other Purpose:					
Code	☐ Direct ☐ In Kind ☐ Payment of Debt					
	Returned Contribution					
	Purpose:					
Code	☐ Direct ☐ In Kind	,, <u>.</u>				
	Payment of Debt Returned Contribution					
	Other Purpose:					
Code	☐ Direct ☐ fa⊨Kind ☐ Payment of Debt					
	Returned Contribution Other					
	Purpose:					
Code	Direct In-Kind					
	Payment of Dobt Returned Contribution					
	Other Purpose:					
		. 				
Code	☐ Direct ☐ In Kind ☐ Payment of Debt					
	Returned Contribution					
	Purpose:					
SUBTOTAL THIS PAG		\$ 0.00				
TOTAL OF ALL PAGES OF SCHEDULE C ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.) \$						



(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	ENDORSER'S OR VENDOR'S NAME	AMOUNT	DATE DEBT	CUMULATIVE	OUTSTANDING
AND MAILING ADDRESS (street, number, city, state, ZIP code)	AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED (mm/dd/yy)	PAID YEAR-TO-DATE	BALANCE THIS PERIOD

LENDER'S OCCUPATION					
					į
LENCER'S OCCUPATION					
LENDER'S OCCUPATION:					
LENEARS DESUPATION					
LANGE TO COOLEAN USA					
LENDER'S OCCUPATION.					
LENDER'S OCCUPATION					
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
TENDERS OCCUPATION					
				F SCHEDULE D	\$ 0.00
	TOTAL OF ALL	PAGES OF SCHEDUL (Enter total on F	ED ON THE LA TEM 19 of the S	ummary Sheet.)	\$



(CFA-4 SCHEDULE E) DEBTS OWED TO 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 TO the committee during the reporting period. Include all amounts the committee has loaned to others.

FILE NUMBER				
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BORROWER'S NAME AND MAILING ADDRESS	CO-SIGNER'S NAME AND MAILING ADDRESS (if any)	ORIGINAL AMOUNT	DATE DEBT	CUMULATIVE	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	(mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	PERIOD
<u></u>					
	<u> </u>	SUBTOTA	! AL THIS PAGE OI		\$ 0.00
	TOTAL OF A	ALL PAGES OF SCHEDUL			\$
		(Enter total on i	TEM 20 of the St	ımmary Sheet.)	