



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

FILED
CLERK OF HENDRICKS COUNTY
Marjorie Pike
2021 JAN 14 PM 3:58

(CFA-4) Summary Sheet

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

FILE NUMBER

32-15-008

TOTAL PAGES IN ENTIRE CFA-4 REPORT

2

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) ☐ Check if this is a new name.
Committee to Elect Ann Hathaway
2. Acronym or Abbreviated Name (if any)
3. Committee Telephone Number
(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
Brownsburg, IN 46112
6. Party Affiliation (if applicable)
Republican

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (Include any nickname.)
Ann Rita Hathaway
8. Party Affiliation or If Independent Candidate
Republican
9. Office Sought (Include district number, if any. Not required for exploratory committee.)
Clerk-Treasurer
10. County of Residence
Hendricks

TYPE OF REPORT

CONVENTION 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 Organization.)
- Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting Period (mm/dd/yy):
From: 01/01/2020 Through: 12/31/2020
- | | COLUMN A
This Period | COLUMN B
Year to Date |
|---|-------------------------|--------------------------|
| 13. Cash on hand and investments at the beginning of this reporting period. | 0.00 | |
| 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.)
- 15b. Unitemized
- 15c. Add lines 15a and 15b in both columns. SUBTOTAL 0.00 0.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL 0.00 0.00

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 0.00 0.00
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) TOTAL 0.00 0.00
19. Debts OWED BY the committee (Use Schedule D.) 126.71
20. Debts OWED TO the committee (Use Schedule E.)

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 <i>Ann Hathaway</i>	Title Treasurer	Date (mm/dd/yy) 01/14/21
Signature of Candidate (if applicable) <i>Ann Hathaway</i>		Date (mm/dd/yy) 01/14/21

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)

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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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Page 2 of 2

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS <i>(if any)</i> <i>(street, number, city, state, ZIP code)</i>	AMOUNT	DATE DEBT INCURRED <i>(mm/dd/yy)</i>	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
Ann Hathaway 19 Carnaby Ct Brownsburg, IN 46112		\$126.71	5/3/2015	\$0.00	\$126.71
		Bal of loan from 2015 campaign			
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
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LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
SUBTOTAL THIS PAGE OF SCHEDULE D					\$ 126.71
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY <i>(Enter total on ITEM 19 of the Summary Sheet.)</i>					\$ 126.71