

## 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? ☐ Yes ✓ No

(CFA-4) **Summary Sheet** 

FILE NUMBER

32-18-034 TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION	District II	MATERIAL MATERIAL	10.00	
1. Full Name of Committee (as on Statement of Organization)  Robert Stringer for Union Township Trustee  Check if this is a new name.				
2. Acronym or Abbreviated Name (if any)		3. Committee Telephone Number ( 317 ) 339-2406		
4. Mailing Address (Address where all campaign finance correspondence is received.) 7677 N. County Road 200 W.				
5. City, State, ZIP Code Lizton, In 46149	6. Party Affiliation Republican	6. Party Affiliation <i>(if applicable)</i> Republican		
CANDIDATE INFORMATION (For Candidate's Committees Only)				
7. Full Name of Candidate (Include any nickname.) Robert Bob Stringer	The second secon	. Party Affiliation or If Independent Candidate Republican		
<ol> <li>Office Sought (Include district number, if any. Not required for exploratory committee.)</li> <li>Union Township Trustee</li> </ol>	10. County of Res Hendricks	ounty of Residence dricks		
TYPE OF REPORT	THE THE PERSON NAMED IN	CONVENTION	CANDIDATES ONLY	
11. Check one:  Pre-Primary Pre-Election Annual Nomination Other		Check one: Pre-Convention		
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend State	ement of Organization.)	Post-Conve	ntion	
		LUMN A s Period	COLUMN B Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.				
14. Cash on hand and investments January 1, current year.				
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		TEL PER E		
15a. Itemized (Use Schedule A.)		0.00	0.00	
15b. Unitemized		0.00	0.00	
15c. Add lines 15a and 15b in both columns.	OTAL	0.00	0.00	
	OTAL	11.57	11.57	
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		0.00	0.00	
17b. Unitemized		0.00	0.00	
17c. Add lines 17a and 17b in both columns.	OTAL	0.00	0.00	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	11.57	11.57	
19. Debts OWED BY the committee (Use Schedule D.)		0.00	A STATE OF THE PARTY OF THE PAR	
20. Debts OWED TO the committee (Use Schedule E.)		0.00	TO THE STORY	
OFFITIGATION .			2	
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 Treasurer Title	Date (mm/d 01/03/	d/yy)	JAN	
Signature of Candidate (if appligable)	Date (mm/dd/yy) 01/03/2024  Date (mm/dd/yy) 01/03/2024  . (IC 3-9-4-5) A person who knowingly			
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)				