



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R17 / 8-23)
Indiana Election Division (IC 3-9-5-14)

(CFA-4)

Summary Sheet

FILE NUMBER

32-16-021

TOTAL PAGES IN ENTIRE CFA-4 REPORT

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 Eric Hython

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number
(317) 372-1502

4. Mailing Address (Address where all campaign finance correspondence is received.) ☐ Check if this is a new address.
P.O. Box 1258

5. City, State, ZIP Code
Brownsville, IN 46112

6. Party Affiliation (if applicable)

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (Include any nickname.)
ERIC M. Hython

8. Party Affiliation or If Independent Candidate
Independent Candidate

9. Office Sought (Include district number, if any. **Not required for exploratory committee.**)
Brownsville School Board - Brown Township

10. County of Residence
Hendricks

TYPE OF REPORT

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)

CONVENTION CANDIDATES ONLY

Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting Period (mm/dd/yy):
From: 1-1-23 Through: 12-31-23

13. Cash on hand and investments at the beginning of this reporting period.

COLUMN A
This Period

COLUMN B
Year to Date

\$5432

14. Cash on hand and investments January 1, current year.

\$5432

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

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.

TOTAL

\$5432

\$5432

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

18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)

TOTAL

\$5432

\$5432

19. Debts OWED BY the committee (Use Schedule D.)

\$1,600-

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 Treasurer Eric M. Hython Title Treasurer

Date (mm/dd/yy)

1/14/24

Signature of Candidate (if applicable)

Eric M. Hython

Date (mm/dd/yy)

1/14/24

FOR OFFICE USE ONLY

2024 JAN 16 AM 8:23

FILED
CLERK OF THE INDIANA COURT

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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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	DATE DEBT INCURRED (mm/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
Eric + Mary Hylton 7405 Windridge Way Brownsburg, IN 46112 LENDER'S OCCUPATION:		\$1,000 Loan to pay expenses	6/5/20		\$1,000
Eric + Mary Hylton 7405 Windridge Way Brownsburg, IN 46112 LENDER'S OCCUPATION:		\$600 Loan to pay expenses	10/23/20		\$600
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
SUBTOTAL THIS PAGE OF SCHEDULE D					\$ 1,600-
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.)					\$ 1,600-