FILED REPORT OF RECEIPTS AND EXPENDITURES (CFA-4) LETHICPTHEHENDRICKS COURT OF A POLITICAL COMMITTEE **Summary Sheet** State Form 4606 (R13/11-05) **FILE NUMBER** Indiana Election commission (IC 3-9-5-14) 5531 INSTRUCTIONS: Please type or print legibly IN BLACK INK all information TOTAL PAGES IN ENTIRE CFA-4 REPORT on this form. For assistance in completing this form, see instructions on the reverse side. IS THIS AN AMENDMENT? Yes X No COMMITTEE INFORMATION Check if this is a new name 1. Full name of committee (as on Statement of Organization) Hendricks Co. Professional Firefighters PAC 2. Acronym or abbreviated name, if any 3. Committee telephone number **HCPFFP** (317) 272-1061 4. Mailing address (address where all campaign finance correspondence is received Check if this is a new address 6319 E. US HWY 36, STE. 2 6. Party affiliation (if applicable) 5. City, state, ZIP code **AVON IN 46123 CANDIDATE INFORMATION (For Candidate's Committee Only)** 7. Full name of candidate (include any nickname) 8. Party affiliation or if independent 9. Office sought (include district number, if any. Not required for exploratory committee. 10. County of residence TYPE OF REPORT CONVENTION CANDIDATES ONLY 11. 12. Check one: Pre-Convention Annual Post-Convention **COLUMN A** COLUMN B 12. Reporting period: 12/31/2019 This Period Year to Date 10/12/2019 Through: From: 13. Cash on hand and investments at the beginning of this reporting period. 52,614,34 14. Cash on hand and investments January 1, current year. 51,865,72 CONTRIBUTIONS AND RECEIPTS (Note: These amounts include in-kind contributions and loans, as well as cash contributions.) 1.938.42 3,646,80 15a. Itemized (use Schedule A) 686,70 686.70 15b. Unitemized SUBTOTAL 4,333,50 15c. Add lines 15a, and 15b in both columns 2.625.12 55,239.46 56,199.22 TOTAL 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B **EXPENDITURES** (Note: These amounts include in-kind expenditures and loan repayments.) 0.00 0.00 17a. Itemized (use Schedule B) (Public Question: use Schedule C) 0.00 0.00 17b. Unitemized 17c. Add lines 17a and 17b in both columns 0.00 0.00 SUBTOTAL 56,199.22 18. Cash on hand and investments at close of this reporting period(subtract 17c from 16 in both columns) 55,239.46 TOTAL 0.00 19. Debts OWED BY the committee (use Schedule D) 20. Debts OWED TO the committee (use Schedule E) 0.00 CERTIFICATION FOR OFFICE USE ONLY I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS Filed: Online TRUE, CORRECT AND COMPLETE. **2**/15/20 Title Date Signature of Treasurer Signature Included Treasurer 01/15/2020 Signature of Candidate (if applicable) Date 01/15/2020 Signature Included 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, 3-9-4-17, 3-9-4-18.)



State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For essistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM15a 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 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). 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	
5531	
Page 1 of 5	

	calendar year. Otherwise, this is optional. CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1	Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	105.00	10/18/2019
Contri	ibutor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
2	Jerry Harder 6378 Timber Climb Drive Avon IN 46123	Contribution: Direct	5.00	100.00	10/18/2019
ontri	butor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
	Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Contribution: Direct	5.00	105.00	10/18/2019
ontri	butor's Occupation (if required): - Firefighter				Jeff Schlageter
4	Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct	10.00	210.00	10/18/2019
ontri	butor's Occupation (if required): - Firefighter				Jeff Schlageter
5	Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	110.00	11/02/2019
ontri	butor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
	SUB	TOTAL THIS PAGE OF SCHEDULE A	\$ 30.00		
		EDULE A ON THE LAST PAGE ONLY TEM 15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other

FILE NUMBER
5531
Page 2 of 5

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 ITEM15a 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 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). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during
the colendar year. Otherwise, this is ontional

the ca	alendar year. Otherwise, this is optional. CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVE
	FULL MAILING ADDRESS (street, number, city, state ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1	Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	115.00	11/16/2019
ontrib	outor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
2	Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	120.00	11/30/2019
ontrib	outor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
3	Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	125.00	12/14/2019
ontrib	outor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
4	Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	0 130.00	12/28/2019
ontrib	outor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
5	Jerry Harder 6378 Timber Climb Drive Avon IN 46123	Contribution: Direct	5.00	105.00	11/02/2019
ontrib	outor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
П	SUB '	TOTAL THIS PAGE OF SCHEDULE A	\$ 25.00		
	TOTAL OF ALL PAGES OF SCH	EDULE A ON THE LAST PAGE ONLY	\$		



State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other

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FILE NUMBER	التؤل
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Page 3 of 5	

	contributor's Full NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1	Jerry Harder 6378 Timber Climb Drive Avon IN 46123	Contribution: Direct	5.00	110.00	11/16/2019
Contril	butor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
2	Jerry Harder 6378 Timber Climb Drive Avon IN 46123	Contribution: Direct	5.00	115.00	11/30/2019
Contril	butor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
3	Jerry Harder 6378 Timber Climb Drive Avon IN 46123	Contribution: Direct	5.00	120.00	12/14/2019
Contril	butor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
4	Jerry Harder 6378 Timber Climb Drive Avon IN 46123	Contribution: Direct	5.00	125.00	12/28/2019
Contril	butor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
5	Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Contribution: Direct	5.00 110.00	11/02/2019	
Contril	butor's Occupation (if required): - Firefighter				Jeff Schlageter
	su	B TOTAL THIS PAGE OF SCHEDULE A	\$ 25.00	HI KATEN	THE RESIDENCE
		CHEDULE A ON THE LAST PAGE ONLY IN ITEM 15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other

FILE NUMBER
5531
Page 4 of 5

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 ITEM15a, 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 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). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the schedule was of Otherwise.

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Contribution: Direct	5.00	115.00	11/16/2019
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
2 Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Contribution: Direct	5.00	120.00	11/30/2019
ontributor's Occupation (if required): - Firefighter				Jeff Schlageter
3 Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Contribution: Direct	5.00	0 125.00	12/14/2019
contributor's Occupation (if required): - Firefighter				Jeff Schlageter
4 Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Contribution: Direct	5.00	130.00	12/28/2019
contributor's Occupation (if required): - Firefighter				Jeff Schlageter
5 Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct	10.00	220.00	11/02/2019
ontributor's Occupation (if required): - Firefighter				Jeff Schlageter
SUB	TOTAL THIS PAGE OF SCHEDULE A	\$ 30.00		
	EDULE A ON THE LAST PAGE ONLY	\$		



State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other

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 ITEM15a 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 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). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is potional.

FILE NUMBER	
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Page 5 of 5	

the calendar year. Otherwise, this is optional.				
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct	10.00	230.00	11/16/2019
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
2 Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct	10.00	240.00	11/30/2019
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
3 Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct	10.00	250.00	12/14/2019
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
4 Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct	10.00	260.00	12/28/2019
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
SUB T	TOTAL THIS PAGE OF SCHEDULE A	\$ 40.00		
	DULE A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet)	\$ 150,00		



State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

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

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 ITEM15a 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 the 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 contributor,
within a calendar year. MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER	
5531	
Page 1 of 1	

with	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED
	(street, number, city, state ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1	Hendricks Co. Professional Firefighters PAC 6319 E. US HWY 36, STE. 2 AVON IN 46123	Contribution: Direct	1,788.42	2,991.80	10/18/2019 Jeff Schlageter
	SUBTO	OTAL THIS PAGE OF SCHEDULE A	\$ 1,788.42		
		DULE A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet)	\$ 1,788.42		