



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

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

**(CFA-4)
Summary Sheet**

FILE NUMBER
5531
TOTAL PAGES IN ENTIRE CFA-4 REPORT
8

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
Hendricks Co. Professional Firefighters PAC

2. Acronym or abbreviated name, if any
HCPFFP

3. Committee telephone number
(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

5. City, state, ZIP code
AVON IN 46123

6. Party affiliation (if applicable)

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. PrePrimary

12. Reporting period:
From: 01/01/2020 Through: 05/08/2020

12. Check one:
 Pre-Convention
 Post-Convention

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	55,239.46	
14. Cash on hand and investments January 1, current year.		56,199.22

CONTRIBUTIONS AND RECEIPTS

(Note: These amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)	200.00	200.00
15b. Unitemized	0.00	0.00
15c. Add lines 15a, and 15b in both columns	200.00	200.00
SUBTOTAL		
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL 55,439.46	56,399.22

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)	1,712.45	1,712.45
17b. Unitemized	0.00	0.00
17c. Add lines 17a and 17b in both columns	1,712.45	1,712.45
SUBTOTAL		
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL 53,727.01	54,686.77
19. Debts OWED BY the committee (use Schedule D)	0.00	
20. Debts OWED TO the committee (use Schedule E)	0.00	

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 Signature Included	Title Treasurer	Date 06/01/2020
Signature of Candidate (if applicable) Signature Included		Date 06/01/2020

FOR OFFICE USE ONLY

Filed: Online
6/1/20 2:25 am

2020 JUN 01 7:36 AM
 FILED
 CLERK OF SUPERIOR COURT
 INDIANAPOLIS, IN

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(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.)



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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 ITEM 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 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 6

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 6756 Woodcliff Cir. Zionsville IN 46077 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	10.00	10.00	01/10/2020
				Jeff Schlageter
2 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	10.00	20.00	01/24/2020
				Jeff Schlageter
3 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	10.00	30.00	02/07/2020
				Jeff Schlageter
4 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	10.00	40.00	02/21/2020
				Jeff Schlageter
5 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	10.00	50.00	03/07/2020
				Jeff Schlageter
SUB TOTAL THIS PAGE OF SCHEDULE A		\$	50.00	
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		



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				RECEIVED BY
1 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	10.00	60.00	03/20/2020
				Jeff Schlageter
2 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	10.00	70.00	04/03/2020
				Jeff Schlageter
3 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	10.00	80.00	04/17/2020
				Jeff Schlageter
4 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	10.00	90.00	05/01/2020
				Jeff Schlageter
5 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	10.00	100.00	05/08/2020
				Jeff Schlageter
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				RECEIVED BY
1 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	5.00	01/10/2020
				Jeff Schlageter
2 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	10.00	01/24/2020
				Jeff Schlageter
3 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	15.00	02/07/2020
				Jeff Schlageter
4 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	20.00	02/21/2020
				Jeff Schlageter
5 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	25.00	03/07/2020
				Jeff Schlageter
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				RECEIVED BY
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				Jeff Schlageter
2 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	35.00	04/03/2020
				Jeff Schlageter
3 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	40.00	04/17/2020
				Jeff Schlageter
4 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	45.00	05/01/2020
				Jeff Schlageter
5 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	50.00	05/08/2020
				Jeff Schlageter
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				RECEIVED BY
1 Kyle Edie 9480 Shady Bend Brownsburg IN 46112 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	5.00	01/10/2020
				Jeff Schlageter
2 Kyle Edie 9480 Shady Bend Brownsburg IN 46112 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	10.00	01/24/2020
				Jeff Schlageter
3 Kyle Edie 9480 Shady Bend Brownsburg IN 46112 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	15.00	02/07/2020
				Jeff Schlageter
4 Kyle Edie 9480 Shady Bend Brownsburg IN 46112 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	20.00	02/21/2020
				Jeff Schlageter
5 Kyle Edie 9480 Shady Bend Brownsburg IN 46112 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	25.00	03/07/2020
				Jeff Schlageter
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				RECEIVED BY
1 Kyle Edie 9480 Shady Bend Brownsburg IN 46112 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	30.00	03/20/2020
				Jeff Schlageter
2 Kyle Edie 9480 Shady Bend Brownsburg IN 46112 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	35.00	04/03/2020
				Jeff Schlageter
3 Kyle Edie 9480 Shady Bend Brownsburg IN 46112 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	40.00	04/17/2020
				Jeff Schlageter
4 Kyle Edie 9480 Shady Bend Brownsburg IN 46112 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	45.00	05/01/2020
				Jeff Schlageter
5 Kyle Edie 9480 Shady Bend Brownsburg IN 46112 Contributor's Occupation (if required): Firefighters/Paramedics -	Contribution: Direct	5.00	50.00	05/08/2020
				Jeff Schlageter
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**(CFA-4 SCHEDULE B)
Itemized Expenditures**

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. 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 Summary 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.

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Page 1 of 1

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)				
Code: Advertising 1 Rocker Apperal 500 Polk Street Greenwood IN 46143		Direct Purpose: T Shirts for Fire Ops 101 class	967.45	967.45	03/07/2020
Code: Missing 2 Jimbo's BBQ 9211 Crawfordsville Rd Indianapolis IN 46234		Direct Purpose: Food For Fire ops 101	500.00	500.00	03/07/2020
Code: Missing 3 Fire/Fleet Equipment 11 Lendale Dr Florence ky 41042		Direct Purpose: Cancer cleaner for Fire Ops 101	245.00	245.00	03/07/2020
SUB TOTAL THIS PAGE OF SCHEDULE B			\$ 1,712.45		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 1,712.45		