



**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

7230

TOTAL PAGES IN ENTIRE CFA-4 REPORT

3

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 County Democratic Boosters

2. Acronym or abbreviated name, if any
HCDB

3. Committee telephone number
(972) 754-9996

4. Mailing address (address where all campaign finance correspondence is received) Check if this is a new address
6768 Hall Rd

5. City, state, ZIP code
Plainfield IN 46168

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. Check one:
 Pre-Convention
 Post-Convention

12. Reporting period:
From: 01/01/2019 Through: 04/12/2019

**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)

234.64

234.64

15b. Unitemized

280.00

280.00

15c. Add lines 15a, and 15b in both columns

SUBTOTAL

514.64

514.64

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

TOTAL

514.64

514.64

EXPENDITURES

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

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

234.64

234.64

17b. Unitemized

17.15

17.15

17c. Add lines 17a and 17b in both columns

SUBTOTAL

251.79

251.79

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

TOTAL

262.85

262.85

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

Title

Date

Signature Included

Treasurer

04/22/2019

Signature of Candidate (if applicable)

Date

Signature Included

04/22/2019

FOR OFFICE USE ONLY

Filed: Paper
4/17/19 6:59 am

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.)



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**(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.

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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 Robert Pope 7663 Monterey Circle Avon IN 46123 Contributor's Occupation (if required): - IT Consultant	Contribution: In-Kind Website	134.64	134.64	03/30/2019 Theresa Shearer
SUB TOTAL THIS PAGE OF SCHEDULE A		\$ 134.64		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$ 134.64		



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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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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: Fundraising 1 Robert Pope 7663 Monterey Circle Avon IN 46123	- IT Consultant	In-Kind Purpose: Website	134.64	134.64	03/30/2019
Code: Contributions 2 Hendricks County Democratic Committee PO Box 721 Danville IN 46122	- County Party	Direct Purpose: Meeting Room	100.00	100.00	03/05/2019
SUB TOTAL THIS PAGE OF SCHEDULE B			\$ 234.64		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 234.64		