

## REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) 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

'es 🗹 No

## (CFA-4) Summary Sheet

FILE NUMBER

32-15-008

**TOTAL PAGES IN ENTIRE CFA-4 REPORT** 

2

COMMITTEE INFORMATION					
Full Name of Committee (as on Statement of Organization)  Committee to Elect Ann Hathaway  Check if this is a new recommendation.					
2. Acronym or Abbreviated Name (if any)		3. Committee Telephone Number			
	( 317	) 459-5920			
Mailing Address (Address where all campaign finance correspondence is received.)     Section 19 Carnaby Ct					
5. City, State, ZIP Code	1	ffiliation <i>(if applic</i>	cable)		
Brownsburg, IN 46112	Republi	ican			
CANDIDATE INFORMATION (For Candidate's C	ommittee	s Only)			
7. Full Name of Candidate (Include any nickname.)		affiliation or If Inde	ependent	Candidate	
Ann Rita Hathaway	Republ	Republican			
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Clerk-Treasurer	l l	D. County of Residence Hendricks			
TYPE OF REPORT		CON	/ENTION	CANDIDATES ONLY	
11. Check one:		Check	k one:		
Pre-Primary Pre-Election Annual Nomination Other			re-Conver	ntion	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend State	ement of Organia	zation.)	ost-Conve	ention	
12. Reporting Period (mm/dd/yy):		COLUMN A		COLUMN B	
From: 01/01/2021 Through: 12/31/2021		This Period	i	Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.		1	00.00		
14. Cash on hand and investments January 1, current year.				100.00	
CONTRIBUTIONS AND RECEIPTS					
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)					
15a, Itemized (Use Schedule A.)					
15b, Unitemized			2.00	2.00	
15c, Add lines 15a and 15b in both columns.	OTAL		2.00	2.00	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	1	02.00	102.00	
EXPENDITURES					
(Note: These amounts include in-kind expenditures and loan repayments.)		, rs.			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)					
17b. Unitemized					
17c, Add lines 17a and 17b in both columns.	TOTAL		0.00	0.00	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	1	02.00	102.00	
19. Debts OWED BY the committee (Use Schedule D.)		2	28.71		
20. Debts OWED TO the committee (Use Schedule E.)				्र 	

CERTIFICATION					
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES	T OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CO	ORRECT AND COMPLETE.			
Signature of Treasure The away	Title Treasurer	Date (mm/dd/yy) 01/14/22			
Signature of Candidate (if applicable)	1	Date ( <i>mm/dd/yy</i> ) 01/14/22			
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)					

FOR OFFICE USE ONLY



## (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.

FILE NUMBER							
	32-	-15-008					
Page _	2	of	2				

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  NATURE OF DEBT	DATE DEBT INCURRED (nim/dd/yy)	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ann Hathaway 19 Carnaby Ct Brownsburg, IN 46112		\$126.71	5/3/2015	\$0.00	\$126.71
AND STATE OF THE S		Bai of loan from 2015 campaign	0/0/2010	ψ0.00	Ψ120.71
LENDER'S OCCUPATION: Ann Hathaway 19 Carnaby Ct Brownsburg, IN 46112		\$100.00	3/20/2019	\$0.00	\$100.00
LENDER'S OCCUPATION:		To open 2019 campaign fund	3/20/2010	φυ.συ	φ100,00
Ann Hathaway 19 Carnaby Ct Brownsburg, IN 46112		\$2.00	2020	\$2.00	\$2.00
LENDER'S OCCUPATION:		To avoid dormant fees	2020	φ2.00	Ψ2.00
CHOCKS COCCUPATION.					
LENDER'S OCCUPATION:					
ELIDERA GOSOF ATION.					
LENDER'S OCCUPATION:			1		
ELIDANS GOOD ATOM.					
(FNPFPP COURTED					
LENDER'S OCCUPATION:					
1 FAIRFOR ACCUIDATION.					
LENDER'S OCCUPATION:		SURTOTA	L THIS PAGE O	F SCHEDULE D	\$ 228.71
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.)					