1. Full name of committee (as on Statement of Organization) Check if this Hendricks Co. Professional Firefighters PAC	JAH 31 JAH 31 1022 EED 10 PM 12: 43 Margarie Pike INFORMATION is a new name	(CFA- Summary FILE NUMBI 5531 AL PAGES IN ENTIRE 6	Sheet ER
2. Acronym or abbreviated name, if any HCPFFP	3. Committee telephone r (317) 272-1061	umber	
 Mailing address (address where all campaign finance correspondence is received 6319 E. US HWY 36, STE. 2 	Check if this is a new address		
5. City, state, ZIP code AVON IN 46123	6. Party affiliation (<i>if appli</i>	cable)	
CANDIDATE INFORMATION (Fo	or Candidate's Committee Only)		
7. Full name of candidate (<i>include any nickname</i>)	8. Party affiliation or if inde	ependent	
9. Office sought (include district number, if any. Not required for exploratory committee.	10. County of residence		
TYPE OF REPORT		CONVENTION CANDI	DATES ONLY
11.		12. Check one:	All and a second
Annual		Pre-Con Post-Co	vention nvention
12. Reporting period: From: 10/10/2020 Through: 12/31/2020	0	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		55,173.92	
14. Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS			56,199.22
(Note: These amounts include in-kind contributions and loans, as well as cash contributio	ns.)		
15a. Itemized (use Schedule A)		140.00	520.00
15b. Unitemized		548.10	1,815.01
15c. Add lines 15a, and 15b in both columns	SUBTOTAL	688.10	2,335.01
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	55,862.02	58,534.23
EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		0.00	1,712.45
17b. Unitemized		0.00	0.00
17c. Add lines 17a and 17b in both columns	SUBTOTAL	0.00	1,712.45
18. Cash on hand and investments at close of this reporting period(subtract 17c from 16 in	both columns) TOTAL	55,862.02	56,821.78
19. Debts OWED BY the committee (use Schedule D) 20. Debts OWED TO the committee (use Schedule E)	and the second second	0.00	
		0.00	
CERTIFICATION			
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLE	EDGE AND BELIEF IT IS		FICE USE ONLY
TRUE, CORRECT AND COMPLETE.		Filed: On 1/31/22	
Signature of Treasurer Title	Date	1/31/22	11:39 am
Signature Included	01/31/2022		
Signature of Candidate (if applicate) Signature Included	Date 01/31/2022		
WARNING: Any information contained in this report may not be copied for sale or used for a (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Level 6 Felony. (IC to file a complete or accurate report as required by the Indiana Campaign Finance Law con (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.)	C 3-14-1-13) A person who fails		



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

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

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

FILE NUMBER			
	5531		
	Page 1 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 Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	100.00	10/12/2020
Contributor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
2 Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	105.00	10/16/2020
Contributor's Occupation (if required): Firefighters/Paramedics -			·	Jeff Schlageter
3 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142	Contribution: Direct	5.00	100.00	10/12/2020
Contributor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
4 Kevin Whitt 201 Wakefield Dr E Greenwood IN 46142	Contribution: Direct	5.00	105.00	10/16/2020
Contributor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
5 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077	Contribution: Direct	10.00	200.00	10/12/2020
Contributor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
SUB T	OTAL THIS PAGE OF SCHEDULE A	\$ 30.00		
	DULE A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet)	\$		



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

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

FILE NUMBER		
	5531	
	Page 2 of 5	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1 Anthony Smith 6756 Woodcliff Cir. Zionsville IN 46077	Contribution: Direct	10.00	210.00	10/16/2020
Contributor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
2 Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Contribution: Direct	5.00	15.00	10/23/2020
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
3 Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Prairie Meadow Drive	20.00	11/03/2020	
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
4 Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Contribution: Direct	5.00	25.00	11/27/2020
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
5 Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Contribution: Direct	5.00	30.00	12/11/2020
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
SUB "	TOTAL THIS PAGE OF SCHEDULE A	\$ 30.00		
	EDULE A ON THE LAST PAGE ONLY FEM 15a of the Summary Sheet)	\$		



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

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

FILE NUMBER			
	5531		
	Page 3 of 5	11	

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
1 Kevin Whitt 5721 Prairie Meadow Drive Indianapolis IN 46221	Contribution: Direct	5.00	35.00	12/25/2020
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
2 Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct	10.00	30.00	10/23/2020
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
3 Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct 10.00 40.00	11/13/2020		
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
4 Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct	10.00	50.00	11/27/2020
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
5 Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct	10.00	60.00	12/11/2020
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
SUB 1	TOTAL THIS PAGE OF SCHEDULE A	\$ 45.00		
TOTAL OF ALL PAGES OF SCHE	EDULE A ON THE LAST PAGE ONLY FEM 15a of the Summary Sheet)	\$		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R13/11-05)

Indiana Election commission (IC 3-9-5-14)

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. (Mervise, this is ontional

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

FILE NUMBER			
	5531		
	Page 4 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
1 Anthony Smith 6252 Canterbury Drive Zionsville IN 46077	Contribution: Direct	10.00	70.00	12/25/2020
Contributor's Occupation (if required): - Firefighter				Jeff Schlageter
2 Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	110.00	10/23/2020
Contributor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
3 Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	115.00	11/03/2020
Contributor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
4 Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	120.00	11/27/2020
Contributor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
5 Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	125.00	12/11/2020
Contributor's Occupation (if required): Firefighters/Paramedics -				Jeff Schlageter
SUB	TOTAL THIS PAGE OF SCHEDULE A	\$ 30.00		
TOTAL OF ALL PAGES OF SCH	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)

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

FILE NUMBER	
5531	
Page 5 of 5	

the calendar year. Otherwise, this is optional. CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A COLUMN B AMOUNT THIS CUMULATIVE	DATE RECEIVED	
(street, number, city, state ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1 Kyle Edie 9480 Shady Bend Brownsburg IN 46112	Contribution: Direct	5.00	130.00	12/25/2020 Jeff Schlageter
Contributor's Occupation (if required): Firefighters/Paramedics -				
SUB TO	TAL THIS PAGE OF SCHEDULE A	\$ 5.00		1
TOTAL OF ALL PAGES OF SCHEDU (Enter total on ITEM	JLE A ON THE LAST PAGE ONLY I 15a of the Summary Sheet)	\$ 140.00		