REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE
State Form 4606 (R15 / 5-19)
Indiana Election Division (IC 3-9-5-14)

(CFA-4)
Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

2

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.

Adams County Democratic Central Committee

2. Acronym or Abbreviated Name (*if any*)

3. Committee Telephone Number

(260) 333-2068

4. Mailing Address (*Address where all campaign finance correspondence is received.*) ☐ Check if this is a new address.

989 Fawn Court

5. City, State, ZIP Code

Decatur, IN 46733

6. Party Affiliation (*if applicable*)

CANDIDATE INFORMATION (*For Candidate's Committees Only*)

7. Full Name of Candidate (*Include any nickname.*)

8. Party Affiliation or If Independent Candidate

9. Office Sought (*Include district number, if any. Not required for exploratory committee.*)

10. County of Residence

TYPE OF REPORT

11. *Check one:*

☒ Pre-Primary ☐ Pre-Election ☐ Annual ☐ Nomination ☐ Other _____

☐ Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) ☐ Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)

CONVENTION CANDIDATES ONLY

Check one:

☐ Pre-Convention
☐ Post-Convention

	COLUMN A This Period	COLUMN B Year to Date
12. Reporting Period (*mm/dd/yy*): From: 01-01-2023 Through: 04-07-2023		
13. Cash on hand and investments at the beginning of this reporting period.	3638.23	
14. Cash on hand and investments January 1, current year.		3638.23

CONTRIBUTIONS AND RECEIPTS

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

	COLUMN A	COLUMN B
15a. Itemized (Use Schedule A.)	.00	.00
15b. Unitemized	100.00	100.00
15c. Add lines 15a and 15b in both columns. **SUBTOTAL**	100.00	100.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. **TOTAL**	3738.23	3738.23

EXPENDITURES

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

	COLUMN A	COLUMN B
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	900.00	900.00
17b. Unitemized	14.35	14.35
17c. Add lines 17a and 17b in both columns. **SUBTOTAL**	914.35	914.35
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) **TOTAL**	2823.88	2823.88
19. Debts OWED BY the committee (Use Schedule D.)	.00	
20. Debts OWED TO the committee (Use Schedule E.)	.00	

CERTIFICATION

FOR OFFICE USE ONLY

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: Judith E Affolder

Title: Treasurer

Date (*mm/dd/yy*): 4-10-2023

Signature of Candidate (*if applicable*)

Date (*mm/dd/yy*)

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)

REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE
State Form 4606 (R15 / 5-19)
Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

FILE NUMBER

Page 2 of 2

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code) / RECIPIENT'S OCCUPATION / OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code C 3rd Congressional District 1330 Illsley Dr. Fort Wayne, IN 46807 District Party Organization	☐ Direct ☑ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	$300	$300	1-23-2023
Code C VoteHitchcock.com % Jennifer Hitchcock 431 Sunset Ln Decatur, IN 46733 Candidate	☐ Direct ☑ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	$300	$300	3-7-2023
Code C Jenny Bowers-Shultz for City Council 214 W Jefferson Decatur, IN 46733 Candidate	☐ Direct ☑ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:	$300	$300	3-15-2023
Code _____	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
Code _____	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _____ Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B		$ 900		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet.)*		$ 900		