



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R17 / 8-23)  
Indiana Election Division (IC 3-9-5-14)

## (CFA-4) Summary Sheet

|                                    |
|------------------------------------|
| FILE NUMBER                        |
| TOTAL PAGES IN ENTIRE CFA-4 REPORT |
| 1                                  |

**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) <input type="checkbox"/> Check if this is a new name.<br>Gregg A. Sprunger for Mayor               |  |
| 2. Acronym or Abbreviated Name (if any)  | 3. Committee Telephone Number<br>( 260 ) 849-2009  |
| 4. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address.<br>1218 Clark St. |  |
| 5. City, State, ZIP Code<br>Berne, IN 46711  | 6. Party Affiliation (if applicable)<br>Republican |

### 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. <b>Not required for exploratory committee.</b> ) | 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

| 12. Reporting Period (mm/dd/yy):<br>From: 4/8/23 Through: 10/13/23          | COLUMN A<br>This Period | COLUMN B<br>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.)   | 0.00 | 0.00 |
| 15b. Unitemized   | 0.00 | 0.00 |
| 15c. Add lines 15a and 15b in both columns. <b>SUBTOTAL</b>                         | 0.00 | 0.00 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. <b>TOTAL</b> | 0.00 | 0.00 |

### EXPENDITURES

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

|   |      |      |
|---|------|------|
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)  | 0.00 | 0.00 |
| 17b. Unitemized   | 0.00 | 0.00 |
| 17c. Add lines 17a and 17b in both columns. <b>SUBTOTAL</b>   | 0.00 | 0.00 |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) <b>TOTAL</b> | 0.00 | 0.00 |
| 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<br><i>Barbara J. Sprunger</i>               | Title<br>Treasurer | Date (mm/dd/yy)<br>10/20/23 |
| Signature of Candidate (if applicable)<br><i>Gregg A. Sprunger</i> |                    | Date (mm/dd/yy)<br>10/19/23 |

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FOR OFFICE USE ONLY

CLERK OF  
COUNTY

10/20/23 4:11:32