SC1-4015

# 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

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: Vote For Mote
2. Acronym or Abbreviated Name *(if any)*:
3. Committee Telephone Number: (317) 502-0833
4. Mailing Address *(address where all campaign finance correspondence is received)* ☐ Check if this is a new address: 84 South Third Avenue
5. City, State, ZIP Code: Beech Grove Indiana 46107
6. Party Affiliation *(if applicable)*: Republican

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

7. Full Name of Candidate *(include any nickname)*: Ron Mote
8. Party Affiliation or if Independent Candidate: Republican
9. Office Sought *(Include district number, if any. **Not required for exploratory committee.**)*: Clerk-Treasurer
10. County of Residence: Marion

### 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 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: From: 10-10-2015 Through: 12-31-2015 | 0 | |
| 13. Cash on hand and investments at the beginning of this reporting period. | | 0 |
| 14. Cash on hand and investments January 1, current year. | | |
| **CONTRIBUTIONS AND RECEIPTS** | | |
| *(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)* | | |
| 15a. Itemized *(use Schedule A)* | 750 | 750 |
| 15b. Unitemized | 22.96 | 22.96 |
| 15c. Add lines 15a and 15b in both columns — SUBTOTAL | 772.96 | 772.96 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B — TOTAL | 772.96 | 772.96 |
| **EXPENDITURES** | | |
| *(Note: These amounts include in-kind expenditures and loan repayments.)* | | |
| 17a. Itemized *(use Schedule B) (Public Question: use Schedule C)* | 772.96 | 772.96 |
| 17b. Unitemized | 0 | 0 |
| 17c. Add lines 17a and 17b in both columns — SUBTOTAL | | |
| 18. Cash on hand and investments at close of this reporting period *(subtract 17c from 16 in both columns)* — TOTAL | 772.96 | 772.96 |
| 19. Debts OWED BY the committee *(use Schedule D)* | 0 | |
| 20. Debts OWED TO the committee *(use Schedule E)* | 772.96 | |

### 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 |
|---|---|---|
| Brendan McKeny | Treasurer | 1-19-16 |
| Signature of Candidate *(if applicable)* | Ron Mote | 1-18-2016 |

**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 Class D felony. *(IC 3-14-1-13)* A person who fails to file a complete or accurate report as required by the Indiana ... 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**

Myla A. Eldridge

JAN 19 2016

FILED

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# (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

## Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND 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 other entities OVER $100 per contributor, within a calendar year MUST be itemized on this schedule (over $200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. 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).

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| CONTRIBUTOR'S FULL NAME AND 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. Beech Grove Fire Fighters Local 416 PAC 748 Massachusetts Ave Indianapolis, IN 46204 | Contributions: [X] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | 750 | 750 | 10-13-15 Ron Mote |
| 2. | Contributions: [ ] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | | | |
| 3. | Contributions: [ ] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | | | |
| 4. | Contributions: [ ] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | | | |
| 5. | Contributions: [ ] Direct [ ] In-Kind (describe) Other Receipts: [ ] Interest [ ] Loan [ ] Misc. (specify) | | | |

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# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

**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. 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 / 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 |
|---|---|---|---|---|---|
| Code 8<br>Roy Hofe<br>801 S. Third Ave<br>Beech Grove, IN 46107 | | ☐ Direct ☐ In-Kind<br>☒ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | 772.96 | 772.96 | 11-4-15 |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| Code | | ☐ Direct ☐ In-Kind<br>☐ Payment of Debt<br>☐ Returned Contribution<br>☐ Other<br>Purpose: | | | |
| | | SUBTOTAL THIS PAGE OF SCHEDULE B | $772.96 | | |
| | | TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet) | $772.96 | | |

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