REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 46606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)
Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

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
Matt Smith for Trustee

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

3. Committee Telephone Number
(765) 425-8491

4. Mailing Address *(address where all campaign finance correspondence is received)* ☐ Check if this is a new address
3915 Broadway St.

5. City, State, ZIP Code
Indianapolis, IN 46205

6. Party Affiliation *(if applicable)*
Republican

CANDIDATE INFORMATION *(1 or Candidate's Committees Only)*

7. Full Name of Candidate *(include any nickname)*
Matthew Smith

8. Party Affiliation or if Independent Candidate
Republican

9. Office Sought *(include district number, if any. Not required for exploratory committees.)*
Washington Township Trustee

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

12. Reporting Period:
From: Jan 1 2015 Through: Dec 31, 2015

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	805.17	
14. Cash on hand and investments January 1, current year.		805.17
CONTRIBUTIONS AND RECEIPTS		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		
15a. Itemized *(use Schedule A)*	—	—
15b. Unitemized	—	—
15c. Add lines 15a and 15b in both columns SUBTOTAL	—	—
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL	805.17	805.17
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(use Schedule B) (Public Question: use Schedule C)*	447.50	447.50
17b. Unitemized	—	—
17c. Add lines 17a and 17b in both columns SUBTOTAL	447.50	447.50
18. Cash on hand and investments at close of this reporting period *(subtract 17c from 16 in both columns)* TOTAL	217.67	217.67
19. Debts OWED BY the committee *(use Schedule D)*	—	
20. Debts OWED TO the committee *(use Schedule E)*	—	

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
[signature]	Treasurer	1-20-16
Signature of Candidate *(if applicable)*		**Date**
[signature]		1-20-16

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 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
FILED
JAN 20 2016
11:30 AM
Myla A. Eldridge

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

(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.

FILE NUMBER

Page _____ of _____

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 ____ Chase Bank	Bank / fee	[X] Direct [ ] In-Kind [ ] Payment of Debt [ ] Returned Contribution [ ] Other ____ Purpose:	12.00	111.50	9-30-15
Code ____ Chase Bank	Bank / fee	[X] Direct [ ] In-Kind [ ] Payment of Debt [ ] Returned Contribution [ ] Other ____ Purpose:	12.00	123.50	10-30-15
Code ____ Chase Bank	Bank / fee	[X] Direct [ ] In-Kind [ ] Payment of Debt [ ] Returned Contribution [ ] Other ____ Purpose:	12.00	135.50	11-30-15
Code ____ Chase Bank	Bank / fee	[X] Direct [ ] In-Kind [ ] Payment of Debt [ ] Returned Contribution [ ] Other ____ Purpose:	12.00	147.50	11-30-15
Code ____ Colleen Fanning	Candidate / City-Council	[X] Direct [ ] In-Kind [ ] Payment of Debt [ ] Returned Contribution [ ] Other ____ Purpose:	100.00	100.00	10-29-15
Code ____ Tim Craft	Candidate / City-Council	[X] Direct [ ] In-Kind [ ] Payment of Debt [ ] Returned Contribution [ ] Other ____ Purpose:	100.00	100.00	4-9-15
Code ____ Chuck Brewer	Candidate / Mayor	[X] Direct [ ] In-Kind [ ] Payment of Debt [ ] Returned Contribution [ ] Other ____ Purpose:	100.00	100.00	
			447.50		
SUBTOTAL THIS PAGE OF SCHEDULE B			$ [illegible]		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY ***(Enter total on ITEM 17a of the Summary Sheet)***			$		

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Code ____ Washington Township GOP Club	Political Party Club Account	☒ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	140.00	140.00	
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:			
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			$140.00		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY ***(Enter total on ITEM 17a of the Summary Sheet)***			$~~[illegible]~~.00 587.50		

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Signature of Candidate *(if applicable)*		**Date**
[signature]		1-20-16

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