Rachel Witt

A campaign that receives/spends less than \$500 is not required to file a CFA-4. Rachel has committed to not spending more than \$500. She did, nevertheless, provide an accounting as of October 2, 2022:

\$216.00 =>100 "proud of our WL Schools" signs. \$0 => a friend's old signs cut down for sign toppers \$30.00 => 100 new yard stakes \$0 => 100 reused yard stakes and 200 reused sign topper stakes \$76.58 => paint Total signs \$322.58 Total website \$81.17 Total so far \$403.75



REPORT OF RECEIPTS AND EXPENDITURES OF A JOLITICAL COMMITTEE State Commission (IC 3.9-5-14)

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? TO VOS

(CFA-4) **Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

Full Name of Committee (as on Statement of Organization) LAURENCE WANG FOR WEST LAFAYETTE SCHOOL B Accomm or Appreciated Name (if any)	of this is a new OARD	name.	szákittania in	(all cases and
				er man
CNICO		northwest.		
CANDIDATE INFORMATION (For C 7. Full Name of Candidate (Include any nickname.) LAURENCE WANG	andidate's C	6. Party	es Only) Affiliation or If Independent C PENDENT CANDID	
9. Office Sought (Include district number, if any Not required for exploratory con	nmittee.)	10. Cou	nty of Residence ECANOE	112
TYPE OF REPORT			The second secon	CANDIDATES ONL
11. Check one. Pre-Primary Pre-Election Annual Nomination Other Final / Disbands Committee (Lines 18, 19, and 20 must be '0') Outgoing Treasurer (Wahin lan (1))	Wilders among Sta	formati et Oron	Check one	ntion
12. Reporting Period (mm/dd/yy): From: 09/01/2022 Through: 10/84/2022	RF	tement of Orgs	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments January 1, current year.		distribution	0.00	
CONTRIBUTIONS AND RECEIPTS				0
(Note: these amounts include in-kind contributions and loans, as well as cash contri	(butions)	T TO SHOW THE		
15a. Itemized (Use Schedule A.)			400.00	400
15b. Unitemized		A CONTRACTOR	1,591.00	1,591
15c. Add lines 15a and 15b in both columns.	8UB	TOTAL	1,991.00	1,99
18. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.		TOTAL	1,991.00	1,99
EXPENDITURES			1,001.00	1,09
Note: These amounts include in-kind expenditures and loan repayments.)				
7a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	4,000		3,047.78	3,04
7b. Unitemized		-	132.59	13
7c. Add lines 17a and 17b in both columns.	SUE	TOTAL	3,180.37	3,18
Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both	columns.)	TOTAL		
Debts OWED BY the committee (Use Schedule D.)			1,189.37	
Debts OWED TO the committee (Use Schedule E)			1,108,37	
CERTIFICATION	Contract of			FOR OFFICE USE O
RTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND Nature of Treasurer	BELIEF IT IS	TRUE, COR	RECT AND COMPLETE.	Filed
Title Title			Date (mm/dd/yy)	
nature of Candidate (if applicable)			Date (mm/dd/yy)	OCT 20
VING: Any information contained in this report may not be copied for sale or used for any committee fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a continue france less committee (Teach Parkets).		Maria Land	10/20/2000	Tionne

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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4506 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

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 ITEM 15a 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 been proceeds and repoyments, refunds, rebates, rehuns 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. Otherwise, this is optional.

	FILE	NUMBE	R	
Page	2	of	5	

A STATE OF MAN

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 (mm-dd/yy) RECEIVED BY
1. LULU ZENG WEST LAFAYETTE, IN 47906	Contributions: Direct In-Kind (describe)			09/11/2022
	Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	
Contributor's Occupation (d required)				
BIN DENG WEST LAFAYETTE, IN 47906	Contributions: Direct In-Kind (describe)			09/17/2022
	Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	
Contributor's Occupation (if required)				
3	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
entributor's Occupation (if required)				
	Contributions: Direct In-Kind (describe)		B. (B.)	
	Other Receipts: Interest Loan Miscellaneous (specify)			
stributor's Occupation (if required)				
	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
ibutor's Occupation (If required)				
SUBTOTAL TH	IS PAGE OF SCHEDULE A	\$ 400.00		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$ 400.00		

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REPORT OF RECEIPTS AND EXPENDITURES

OF A POLITICAL COMMITTEE State Form 4806 (R15 / 5-19) Indiana Election Division (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 entries 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.

1	FILE NUMBER				
Page _	3	of	5		

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 MOUNT THIS PERIOD	COLUM CUMULA YEAR-TO	TIVE F	DATE OF EXPENDITURE (min/ddf/yy)	
LAURENCE WANG WEST LAFAYETTE, IN 47907	N/A	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$248.77	\$248	3,77	09/01/2022	
Code A LAURENCE WANG WEST LAFAYETTE, IN 47907	N/A	Direct In-Kind Payment of Debt Returned Contribution Other Purpose	\$298.00	\$29	8.00	09/12/202	22
Code A LAURENCE WANG WEST LAFAYETTE, IN 47907	N/A	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$479.36	\$4	79.36	09/21/20	22
Code A LAURENCE WANG WEST LAFAYETTE, IN 47907	N/A	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$347.23	\$3	347.23	09/23/2	2022
Code A LAURENCE WANG WEST LAFAYETTE, IN 47907	N/A	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$143.9	5 \$	143.9	5 09/20	/201
Code A LAURENCE WANG WEST LAFAYETTE, IN 47907	N/A	Direct in-Kind Payment of Debt Returned Contribution Other Purpose:	\$149.2	23	\$149.2	23 09/2	6/2
AURENCE WANG VEST LAFAYETTE, IN 47907	N/A	Direct In-Kind Phyment of Debt Returned Contribution Other Purpose:	\$445.	75	\$445.	75 08/	/30/
	SUBTOTAL THIS PA	GE OF SCHEDULE		2.29			
	inter total on ITEM 17a of			7.78			



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

INSTRUCTIONS: Please type of 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 lotated on ITEM 1/2 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 N	NUMBE	R	
Page_	4	_ of	5	

RECUPIENT'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 A LAURENCE WANG WEST LAFAYETTE, IN 47907	N/A	Direct in-Kind Payment of Debl Returned Contribution Other Purpose:	\$298.35	\$298.35	9/25/2022
Code A LAURENCE WANG WEST LAFAYETTE, IN 47907	N/A	Direct In-Kind Payment of Debt Returned Contribution Other Purpose	\$338.79	\$338.79	09/19/2022
AURENCE WANG VEST LAFAYETTE, IN 47907	N/A	Direct in-Kind Payment of Debt Returned Contribution Other Purpose:	\$298.35	\$298.35	09/17/2022
de		Direct In-Kind Payment of Debt Returned Contribution Other Purpose;			
		Direct In:Kind Payment of Debt Returned Contribution Other Purpose:			
		Direct in-Kind Payment of Debt Returned Contribution Other Purpose:			
		Direct In-Kind Payment of Debt Returned Contribution Other Purgose:			
	SUBTOTAL THIS PAGE	GE OF SCHEDULE	B \$ 935.	49	
	S OF SCHEDULE B ON TH	E LAST PAGE ONL	Y		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4506 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in complaining this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount. OWEO BY the committee during the reporting period, include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A fender's accounts is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional

	FILE NUMBER				
i di Sali					
Page _	5	of	5		

			Tage	SUB-INITIAL SECTION	PAGENCE FOR STORY		
GREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME AND MAILING ADDRESS (fluin) (afreet, number, city, stirle, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED (nom/mit/yy)	CUMULATIVE PAID YEAR-10 DATE	OUTSTANDING BALANCE THIS PERIOD		
LAURENCE WANG		\$1,189.37					
WEST LAFAYETTE, IN 47907			10/14/2022	\$0.00	\$1,189.37		
LENGERS CODUPATION			RF		70.00		
NOER'S OCCUPATION							
CERTS COCUPATION							
ER'S OCCUPATION					The Acceptance		
With Reservoir							
PS OCCUPATION							
			E VALUE				
OCCUPATION							
CCLPATION		SURTO	OTAL THIS PA	GE OF SCHED	ULED \$ 1,189		
	TOTAL OF AL	PAGES OF SCHE	DULE D ON TH	E LAST PAGE	ONLY		
	10 IAL OF AL	(Enter total	on ITEM 19 of	the Summary	Sheet) \$ 1,189		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiano Election Division (IC 3-9-5-14)

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 A

(CFA-4) **Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

Title Date (mm/dd/yr) Filed 10/20/22 Date (mm/dd/yr) OCT 2 0 207	AN AMENDMENT? Yes No		2	and the second
2. According of Abbreviolated Name of any) Semple of Register Constitute Con	1. For a COMMITTEE INFORMATION			
Application of Abbrevious Approaches Approaches Committee Co		namo,		
Check if this is a new address Check if this is an experiment Check if this is a new address Check if this is a new address Check if this is a new address	2. Acronym or Abbreviated Name (Fany)	3. Committee T	elephone Number	ANNA SERVE
West Lafayette IIV 47906 CANDIDATE INFORMATION (Fur Conditions of Committees Original Committees) 2. Full Name of Candidate (Institute any nickname.) 8. Perty Affiliation of It Independent Candidate West Lafayette Community School Committees) 10. County of Residence Type Cance Type Office Report Convention Committees (Los Institute) 11. Canada one Type Personal Managary (Institute) Pre-Princey Men Personal Managary (Institute) 12. Reporting Period (mandday): From: 4/19/20 Through: Institute (Institute) 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments January 1, current year. (Mode: these amounts include in-lained contributions and bears, as well as each contributions.) 15. Add lines 15 and 15b in both columns. 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. EXPENDITURES (Mode: Those amounts include in-lained expenditures and loan repeyments.) 17. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17. Debts OWED BY the committee (Use Schedule D.) Debts OWED BY the committee (Use Schedule D.) CERTIFICATION Title CERTIFICATION CERTIFICATION CERTIFICATIO	4 Main			
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7. Full Name of Candidate (microser in Indicates) in Microseries (Indicates) in Microseries (Indicat		6. Party Affiliati	on (if applicable)	
A Parry Affiliation or If Independent Candidato Kare South (procuse district number, 4 any, Not required for exploratory committee.) 9. office Sought (procuse district number, 4 any, Not required for exploratory committee.) 10. County of Residence Type Office of Campartine South (part) 11. Check one: Per-Printery Per-Printer	CANDIDATE INFORMATION (For Candidate's Co	omenitees On	(re)	
9. Office Sought (include district number, if any, Not required for exploratory committee.) West Lafayette Computity School Corporation School Poard. 11. Check one Type Office Pre-Point Pre-Pictory Pre-P	rull Name of Candidate (Include any nickname.)	The same of the sa		ent Candidate
Tope Cancer	9. Office Sounds (Include district purpose)	Market Str.		
11. Check one: Pre-Hillary Pre-Beddon Annue Nomination Other Pre-Hillary Pre-Beddon Annue Nomination Other Pre-Convention Pre-Convention Pre-Convention Pre-Convention Pre-Convention Pre-Convention Pre-Convention Pre-Convention Pre-Convention Post-Convention Post-Conventio	West Latavette Compunity School (accounts a School des	STREET, STREET, STREET	SOURCE ASSESSMENT OF THE PROPERTY OF THE PARTY OF THE PAR	
11. Check one: Phe-Pilmary Pre-Election Annual Noninstion Other Phe-Pilmary Pre-Pilmary Pre-Pi	TYPE OF REPORT	Tippeco	NAME OF TAXABLE PARTY.	
Pre-Convention Nomination Other Prest	11. Check one:		State of the later	
Prest Controlled (Part 12, seed 20 mast so 97.) Outgoing Treasurer (Water ten (10) days emend Statement of Organization.) Post-Convention	☐ Pre-Primary ☑ Pre-Election ☐ Annual ☐ Nomination ☐ Other			
Through: 10/14/32 COLUMN A This Period 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS (Note: these emounts 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 columna. SUBTOTAL CO- EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.) 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17b. Unitemized 17c. Add lines 17a and 17b in both columns. SUBTOTAL 2156.66 2156.6	Final / Disbands Committee (Lines 18, 19, and 20 must be 10".) Oulgoing Treasurer (Within ten (10) days amend State	ment of Organization.)	Post-C	
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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. 16. Add lines 15a and 15b in both columns. SUBTOTAL O EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.) 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) 17b. Unitemized 17c. Add lines 17a and 17b in both columns. SUBTOTAL 2 156.66 2 2 156.66	13. Cash on hand and investments at the beginning of this reporting period.		-0-	
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### 2156.66 ### 2	17a. Itemized (Use Schedule R.) (Public Oversteen van Och Internation)			
17c. Add lines 17a and 17b in both columns. 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) 10. Debts OWED TO the committee (Use Schedule E.) 10. De	17b. Unitemized	2	156.66	9215666
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) 10. Debts OWED TO the committee (Use Schedule E.)	17c. Add lines 17a and 17h in both columns			2130,00
9. Debts OWED BY the committee (Use Schedule D.) 1. Debts OWED TO the committee (Use Schedule E.) CERTIFICATION CERTIFICATION FOR OFFICE USE ON Title Date (mm/dd/yr) Filed ING: Any information contained in this OCT 20 200		DTAL #2	156.66	42151 21
CERTIFICATION CERTIFICATION CERTIFICATION CERTIFICATION FOR OFFICE USE ON Tature of Treasurer Title Date (mm/dd/yr) 10/20/22 Date (mm/dd/yr) Date (mm/dd/yr) ING: Any information contained in this	2. Debte ONE DOWN	TOTAL A	215/ 1/	2136,66
CERTIFICATION CERTIFICATION FOR OFFICE USE OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. Title Date (mm/dd/yy) ING: Any information contained in this.	O. Debts OWED BY the committee (Use Schedule D.)			2/56.66
CERTIFICATION CERTIFICATION FOR OFFICE USE OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. Title Date (mm/dd/yy) ING: Any information contained in this	U. Debts OWED TO the committee (Use Schedule E.)			
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ature of Candidate (if applicable) Date (mm/dd/yy) ING: Any information contained in this	ERTIFY THAT I HAVE EXAMINED THIS STATEMENT TO THE STATEME	100	ON CONTRACT	FOR OFFICE USE OU
ature of Candidate (if applicable) Date (mm/dd/yy) ING: Any information contained in this	natyre of Treasurer	JE, CORRECT AN	ID COMPLETE	- THE USE UNL
ING: Any information contained in this	Karen S. Sounger	Date (m	m/dd/yy)	Filed
ING: Any information contained in this	ature of Candidate (if applicable)	10/2	0/22	
ING: Any information contained in this		Date (m.	middiaa	OCT 2 0 2022
Total life of money asserts.	ITING: Any information contained in this report may not be copied for sole course.			OCI CH TOLL
The Figure Commiss a Level 6 felony. (IC 3-14-1-13) A person who follows the State of the State	fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who falls to file a complete or accurate	3-9-4-5) A perso	on who knowingly	TIPPECANCE COUNT

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

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

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 fecipient, within a calendar year MUST be itemized on this schedule (over \$200, a 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.

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

FILE NUMBER				
	M2=3			
Page _	/ of	1		

RECIPIENT'S MAME AND MAKING ADDRE	SS 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)
Go Daddy. (Om, LLC 2155 E. Go Duldy Way Tempe, Arizona 85284	Candidate - 2022 WL School Board	Direct In-Kind Payment of Debt Returned Contribution Other Purpose Website	412.17	412.17	09/07/22
Sumy Designs 3100 Hamilton St. W. Lafayette, IN 47906	Candidate - 2022 W.L. School Board	Direct M. In-Kind Payment of Debt Returned Contribution Other Purpose: Website I-fosting	\$375.00 \$20.00	#375.00	09/24/22
Signarama Valparaiso 405 Elm St. Valparaiso, IN 46383	WL School Board	Direct In-Kind Payment of Debt Returned Contribution Other Purpose Yourstand	\$1337.00	#1337.00	09/28/22
Stuples 3500 State Route 38 Lafayette, IN 47-905	Candidate - 2022 WL School Board	Direct In-Kind Payment of Debt Returned Contribution Other Purpose Campaign Flyers	10412:49	412.49	1 0/10/22
de		Direct In-Kind Peyment of Debt Returned Contribution Other Purpose			
		Direct in-Kind Payment of Debt Returned Contribution Other Purpose:			
		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAGE			06	
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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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4808 (R15 / 5-19) Indiana Electon Division (IC 3-9-5-14)

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? Tyes

✓ No

(CFA-4) **Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

3

	COMMITTEE INFORMATION				
Full Name of Committee (as on Statement of Organiza Dacia Mumford for West Lafayette School Bo	tron) Check if this is a new nar	110.			
Acronym or Abbreviated Name (If any)	2 Committee Telephone Number				
4 Mailing Address (Address where all campaign finance	4 Mailing Address (Address where all campaign finance correspondence is received.) Check if this is a new address.				
5. City, State, ZIP Code	5. City. State. ZIP Code 6. Party Affiliation (If applicable)				
West Lafayette, IN 47906					
CANDIDATE IN	FORMATION (For Candidate's Con	nmittees Only))		
7. Full Name of Candidate (Include any nickname.) Dacia Jeanne Mumford		8. Party Affiliation	or If Independent Ca	noisale	
Office Sought (Include district number, if any. Not requ WLCSC School Board	ired for exploratory committee.)	10. County of Re Tippecanoe	sidence		
TYPE OF	REPORT	West Comment	CONVENTION C	ANDIDATES ONLY	
11. Check one: Pre-Primary Pre-Election Annual Nomination Final / Disbands Committee (Lines 18, 19, and 20 must be 10.)	of USE All control from the Control of Contr	and of Comments and L	Check one: Pre-Convent Post-Convent		
The second of the second secon	ordinal de la caracter i unitant ten (10) days activito scision	March Co.	-	COLUMN B	
12. Reporting Period (mm/dd/yy) From: 4/9/22 Throu	_{ugh.} 10/14/22		OLUMN A his Period	COLUMN 8 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					
(Note: these amounts include in-kind contributions and los	ns, as well as cash contributions)		200	0.00	
15a. Ilemized (Use Schedule A.)			0.00	0.00	
15b. Unitemized			1,416.64	1,416.64	
15c. Add lines 15a and 15b in both columns.	SUBT		1,416.64	1,416.6	
16. Add lines 13 and 15c in Column A and lines 14 and 15c	in Column B. T	OTAL	1,416.64	1,416.6	
EXPENDITUR	ES				
(Note: These amounts include in-kind expenditures and loa	n repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Sch	edule C.)		1,139.34	1,139.3	
17b. Unilemized			277.30	277.	
17c. Add lines 17a and 17b in both columns.	SUB'	TOTAL	1,416.64	1,416.	
8. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	0.00	0.	
9. Debts OWED BY the committee (Use Schedule D.)			0.00		
0. Debts OWED TO the committee (Use Schedule E.)			0,00		
CER	TIFICATION			OR OFFICE USE ONL	
CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES	T OF MY KNOWLEDGE AND BELIEF IT IS T	RUE CORRECT A	ND COMPLETE		
Darin Mul-	Title Candidate		nm/dd/yy) 0/20/22		
gnature of Candidate (if applicable)			nm/dd/yy) 0/20/22		
ARNING: Any information contained in this report may not be copied of a fraudulent report commits a Level 6 felony, (IC 3-14-1-13) A property Finance Law commits a Class B misdemeanor, (IC 3-14-1-14)	erson who fails to file a complete or accura	(IC 3-9-4-5) A per ite report as requi	son who knowingly red by the Indiana		



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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4808 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For essistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts lotated on ITEM 15a of the Summary Sheet All cumulative contributions from individuals OVER \$100 per controllor, within a calendar year MUST be terrized on this schedule (over \$200, if regular party committoe). 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 is occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER					
	16.5		con .		
Page	2	of	3		

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 (mini-datyy) RECEIVED BY
I received direct cash contributions from 36 local residents for a total of \$1242.66. No individual contributed more than \$40.	Contributions; Direct In-Kind (describe)			
Communication from the train sets.	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation of required)				Control of the Control
	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
entributor's Occupation (d required)				
	Contributions: Direct In-Kind (describe)			
	Other Receipts Interest Loan Miscellaneous (specify)			
ributor's Occupation (if required)				
	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
utor's Occupation (# required)				
	Contributions: Direct in-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
or's Occupation (if required)				
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TOTAL OF ALL PAGES OF SCHEDULE A O	N THE LAST PAGE ONLY a of the Summary Sheet.)	s		



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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4505 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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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 cardidate, regularive caucus, publical action, or regular party committees) MUST be itemized on this schedule.

	FILE I	NUMBE	R.	
a in				1
Page _	3	of	3	

RECIPIENT'S NAME AND WAILING 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-10-DATE	DATE OF EXPENDITURE (minimitally)
Code AGE Graphics, LLC 52231 State Road 248 Long Bottom, OH 45743		Divect I have been	\$625.00	\$625.00	9/8/22
GotPrint 7651 N San Fernando Rd Burbank, CA 91505		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Fliers	\$375.68	\$375.68	9/7/22
FedEx Office 5520 South Street afayette, IN 47905		Direct In-Kind Payment of Debt Returned Contribution Other Purpose Copies	\$138.66	\$138.66	10/4/22
ode		Direct In-Kind Payment of Debt Resumed Contribution Other Purpose:			
е		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
		Direct In-Kind Payment of Debt Returned Contribution Other Purpose;			
		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG	SE OF SCHEDULE	B \$ 1,139	.34	
TOTAL OF ALL PAGE	OF SCHEDULE B ON THE	LAST PAGE ONL	Y		

(Enter total on ITEM 17a of the Summary Sheet.)



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4605 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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 4 No

(CFA-4) **Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

4

COMMITTEE INFORMATION			
1 Full Name of Committee (as on Statement of Organization)	Market State		
2 Acronym or Abbreviated Name (if any)	Committee Tele	ephone Number	
4 Mailing Address (Address where all campaign finance correspondence is received) Che	ck if this is a new	v address	Section 1
5. City, State, ZIP Code West Lafayette, IN 47906	8. Party Affiliation	(if applicable)	
CANDIDATE INFORMATION (For Candidate's Con-	nmittees Only)	STATE OF THE PARTY
	Complete Com	n or If Independent Ca	ndidate
148,000 0-1	10. County of Re Tippecanoe	sidence	
TYPE OF REPORT		CONVENTION C	ANDIDATES ONLY
11. Check one. Pre-Primary 4 Pre-Election Annual Nomination Other		Check one: Pre-Convent	юп
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend Statem	ent of Organization.)	Post-Conver	ntion
12. Reporting Period (mm/dd/yy): From: 08/26/2022 Through: 10/14/2022		OLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period		. 0	
14 Cash on hand and investments January 1, current year.			0
CONTRIBUTIONS AND RECEIPTS	E-ROSE		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		733	733
15s Itemized (Use Schedule A.) 15b Unitemized		619	619
15c. Add lines 15a and 15b in both columns.	DTAL	1352	1352
The state of the s	OTAL	1352	1352
EXPENDITURES			ALSO RECEIVED
Note: These amounts include in-kind expenditures and loan repayments.)			
Pa Itemized (Use Schedule B.) (Public Question: use Schedule C.)		589	58
b Uniternized		149	14
	TOTAL	738	73
Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	614	6
Debts OWED BY the committee (Use Schedule D.)		733	THE REAL PROPERTY.
Debts OWED TO the committee (Use Schedule E.)		0	
Debb Office To the Committee (Ose Sociedade L.)			FOR OFFICE USE ONL

	FOR OFFICE USE ONLY		
CERTIFY THAT I HAVE EXAMINED THIS STATEMENT.	TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS		
ignature of Tressurer	Title Treasurer	Date (mm/dd/yy) 10/18/22	Filed
gnature of Candidate (if applicable)		Date (mm/dd/yr) 10 (18 (22	OCT 18 202
URNING: Any information contained in this report may no	of be copied for sale or used for any commercial purpos	a. (IC 3-9-4-5) A person who knowingly	

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 npaign 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 4608 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

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

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK as information on this schedule. For assistance in complating this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 158 of the Summary Sheet. As cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be termized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan year process are payments, refunds, rebates, returns of depost, 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 contribution's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER				
Page	2	of	4	

GONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (suppl. number, city, state, 7IP coste)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. Angela Janes, Mother, West Lafayette, IN 47906	Contributions: Direct In-Kind (describe)			09/01/2022
	Other Receipts Interest & Loan Miscellaneous (specify)	733	733	Troy Janes
Contributor's Occupation (if required)				
2	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)			A Carrolf water	
	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
tributor's Occupation (If required)	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
ibutor's Occupation (if required)				
	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscelfarieous (specify).			
A. A. Constant of Physics of Letter				
nor's Occupation (if required)	UID DAOF OF COURDING A	\$ 733		5 - BI
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TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE UNLY	5 733		



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

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				
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Page	3	of_	4	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE the specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mini/did/yy)
Code A AGE Graphics, LLC 678 Collins Rd, Little Hocking, OH 45742		Direct : n-Kind Payment of Debt Returned Contribution Offer	325	325	09/1/2022
Code A GotPrint.com, 7651 N, San Fernando Rd Burbank, CA 91505		Direct In-Kind Payment of Debt Returned Contribution Other Purpose.	109		09/06/2022
GotPrint.com, 7651 N. San Fernando Rd. Burbank, CA 91505		Direct in-Kind Payment of Debt Returned Contribution Other Purpose	155	264	10/06/2022
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose			
ode		Direct In-Kind Payment of Debt Returned Contribution Other Purpose	-		
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le		Direct in Kind Payment of Debt Returned Contribution Other Purpose:			
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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 D) DEBTS OWED BY THIS COMMITTEE

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. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the catendar year. Otherwise, this is optional.

FILE NUMBER						
Page	4	of	4			

CREDITOR'S OR LENDER SINAME AND MAILING ADDRESS	ENDOSSER'S OR VENDOR'S NAME AND MAILING ADDRESS (Many)	AMOUNT	DATE DEBT PICURRED	CUMULATIVE CIAQ	OUTSTANDING BALANCE THIS
(street number, city, state, ZIP code)	(street number, city, state, ZIP code)	NATURE OF DEBT	(aun ad yy)	YEAR-TO-DATE	PERIOD
Angela Janes, West Lafayette, IN 47906		733	09/01/2022	0	733
LENSER'S OCCUPATION		Personal loan from candidate	03/0 12022		
NOERS DOCUMATION					
DERIS COCUPATION					
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OCCUPATION					

TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet.)

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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE Sur Form 4606 (R15 / 5-19) India E Exten Division (IC 3-9-5-14)

(CFA-4) **Summary Sheet**

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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? TYPE W No

1 Full Name of Committee (as on Statement of Organization) Check if this is a new name of Committee Lyle	ie .		ACCOUNT OF THE			
2 Agranum of Abbandated News (1)	Committee Telep	hone Number	A LEADING			
2 Acronym or Abbreviated Name (if eny)	COMMITTEE LESS.	July 19 19 19 19 19 19 19 19 19 19 19 19 19				
there all campaign finance correspondence is raceived) Che	ck if this is a new	address				
5 City, State, ZIP Code West Lafayette, IN 47906	Party Affiliation	ation (if applicable)				
CANDIDATE INFORMATION (For Candidate's Cor	nmittees Only)					
7. Full Name of Candidate (Include any nickname) George R Lyle IV		or if Independent Cand	idate			
Office Sought (Include district number, if any Not required for exploratory committee.) WLCSC Board of Trustees	Tippecanoe	anoe was a second and a second a				
TYPE OF REPORT		CONVENTION CA	NDIDATES ONLY			
11 Check one. Pre-Primary	nne of Ornanization 1	Check one Pre-Convention Post-Convention				
Final / Disbands Committee (Lines 18, 19, and 20 must be '0') Outgoing Treasurer (Within ten (10) days amend Stator	And the street was a second second	OLUMN A	COLUMN B			
12 Reporting Period (mm/dd/yy). From 08/12/2022 Through 10/19/2022		his Period	Year to Date			
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)		0050 75	2853			
15a, Itemized (Use Schedule A.)		2853.75	2000			
15b, Unitemized		2853.75	2853			
Sc. Add lines 15a and 15b in both Columns.	OTAL	CONTRACTOR CONTRACTOR CONTRACTOR DE	2853			
6. Add lines 13 and 190 in Column A site lines 14 and 190 in Column 5	TOTAL	2853.75	200			
EXPENDITURES	No.					
lote: These amounts include in-kind expenditures and loan repayments.)		2318.48	231			
a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		2510.40	201			
b. Uniternized	TOTAL	2318.48	23			
Add thes fra and from both colonins.	TOTAL	and the second second second second	5			
Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	535.27				
Debts OWED BY the committee (Use Schedule D.)		of the latest and the				
Debts OWED TO the committee (Use Schedule E.)		0				

CEDT	TIC II	$\sim \wedge$ T	TO M
CERT	Hell	CAI	IOM

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Candidate (if applicable)

mmns a Class Briesdemeance

Title Treasurer

FOR OFFICE USE O

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 traudulent 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)

Total Carin Donations Total Cash over 5100																				
285.17																				4
Received By Total Conductor	9/13/22 George Lyfe	9/19/22 Georga tyle	9/14/22 George Lyle	30/19/22 George 19fe	10/19/22 George Lyle	9/16/22 George Lyle	10/11/22 George Live	10/19/22 George Lyfe	10/11/22 George Lyfe	10/11/22 George Lyle	10/10/22 George Lyle	10/10/22 George Lyfe	9/15/22 George Lyfe	9/16/22 George Lyfe	9/12/22 George Lyle	9/28/22 George Life	10/6/12 George Lyle	10/16/22 George Lyle	10/19/22 George Lyle	9) 18/12 George Lyle
Donation Type Date Received		(print and web 545 design sveil)	30 Gash (via Praybal)	20 Cash (via PayPal)	SO Cash (via PayPal)	25 Cash (wa PayPal)	10 Cash (ve Payfral)	50 Cash (via PayPai)	10 Cash (via PayPal)	25 Cash (via Paybal)	SO Cash (vie PayPel)	50 Cash (via PayPal)	200 Cash (wa PayPai)	100 Cash (via PayPal)	100 Cash (via PayPal)	100 Cash (via PayPail)	Soo Cash (via PayPal)	100 Cash (via PayPal)	100 Cash (via PayPal)	100 Cash (via PayPel)
Amount (USO)																				

Anthomy Bergstrom

Theresa Cornett

Halfie Gorup

Bruno Maser

Alan Karpick

Enca Reyes

Juli Salem

1300

Donor Docupation

Donor Address

Donor Name

George Lyfa

Army Masson

Tarah Sanders

Amy Masson

Betsy Maddox Kristine Kezley

- Alice Pawley

Elizabeth Lyle-Clayton

Creasie Hill

Stephen Byrn

. Alex Francis

Anthony Garrett

Cotrn William

"" son (10) days amons c.

Total Expenditures	403.93	266.75	1647.8
Amount			
Expense Code	A - Advertising	A - Advertising	A - Advertising
Service Provided	Printed Materials	Printed Materials	Yard Signs
Vendor/Recipient Copymat, 20 N.	Salisbury, West Lafayette, IN 47906	Staples, 3500 SR 38, Lafayette, IN 47905	Sign Art, 181 Sagamore Parkway South, Suite B,

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