



# REPORT OF RECEIPTS AND EXPENDITURES A POLITICAL COMMITTEE

State Form 4606 (R14 / 10-17)  
Indiana Election Division (IC 3-9-5-14)

OF

(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 <i>Statement of Organization</i> ) <input type="checkbox"/> Check if this is a new name.<br><b>Ben Schoch for Allen County Council District 2</b> |  |
| 2. Acronym or Abbreviated Name (if any)  | 3. Committee Telephone Number<br>(260 )705-1509  |
| 4. Mailing Address (Address where all campaign finance correspondence is received.) <input checked="" type="checkbox"/> Check if this is a new address.<br>2923 Santa Rosa Dr      |  |
| 5. City, State, ZIP Code<br>Fort Wayne Indiana 46805   | 6. Party Affiliation (if applicable)<br>Democrat |

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

|  |  |
|--|--|
| 7. Full Name of Candidate (Include any nickname.)<br>Ben Walker Schoch   | 8. Party Affiliation or If Independent Candidate<br>Democrat |
| 9. Office Sought (Include district number, if any. <b>Not required for exploratory committee.</b> )<br>Allen County Council District 2 | 10. County of Residence Allen                                |

### TYPE OF REPORT

### CONVENTION CANDIDATES ONLY

|   |   |
|---|---|
| 11. Check one:<br><input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other<br><input type="checkbox"/> Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) <input type="checkbox"/> Outgoing Treasurer (Within ten (10) days amend Statement of Organization.) | Check one:<br><input type="checkbox"/> Pre-Convention<br><input type="checkbox"/> Post-Convention |
|---|---|

|   |                         |                          |
|---|-------------------------|--------------------------|
| 12. Reporting Period (mm/dd/yy):<br>From: 10-11-18 Through: 12-31-18        | COLUMN A<br>This Period | COLUMN B<br>Year to Date |
| 13. Cash on hand and investments at the beginning of this reporting period. | 130.76                  |                          |
| 14. Cash on hand and investments January 1, current year.                   |                         | 0                        |

### CONTRIBUTIONS AND RECEIPTS

|   |        |   |
|---|--------|---|
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) |        |   |
| 15a. Itemized (Use Schedule A.)   | 0      | 0 |
| 15b. Unitemized   | 80     | 0 |
| 15c. Add lines 15a and 15b in both columns. <b>SUBTOTAL</b>                                   | 0      | 0 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. <b>TOTAL</b>           | 210.76 | 0 |

### EXPENDITURES

|   |        |   |
|---|--------|---|
| (Note: These amounts include in-kind expenditures and loan repayments.)   |        |   |
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)  | 0      | 0 |
| 17b. Unitemized   | 30     | 0 |
| 17c. Add lines 17a and 17b in both columns. <b>SUBTOTAL</b>   | 30     | 0 |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) <b>TOTAL</b> | 180.76 | 0 |
| 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<br><i>Colleen P...</i>   | Title<br>Treasurer | Date (mm/dd/yy)<br>12-20-18 |
| Signature of Candidate (if applicable)<br><i>Ben Walker Schoch</i>  |                    | Date (mm/dd/yy)<br>12-20-18 |

**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)

### FOR OFFICE USE ONLY

2019 JAN - 8 PM 12: 41  
ELECTION BOARD  
INDIANA CAMPAIGN FINANCE BOARD  
AND SUPERIOR COURTS