



**REPORT OF RECEIPTS AND EXPENDITURES
A POLITICAL COMMITTEE**

State Form 4008 (2014-15)
Indiana Election Division (IC 3-9-16)

OF

**(CFA-4)
Summary Sheet**

FILE NUMBER

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.

TOTAL PAGES IN ENTIRE CFA-4 REPORT

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.
Committee to Reelect Pat Turner to Wasie Township Board

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number
260-466-1123

4. Mailing Address (Address where all campaign finance correspondence is received) Check if this is a new address.
314 E. Williams

5. City, State, ZIP Code
Fort Wayne, IN 46803

6. Party Affiliation (if applicable)
Democratic

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (Include any nickname)
PATRICIA PAT TURNER

8. Party Affiliation or if Independent Candidate
Democrat

9. Office Sought (Include district number, if any. Not required for exploratory committee.)
Wasie Township Board

10. County of Residence
Allen

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. Check one:
 Pre-Primary Pre-Election Annual Nomination Other
 Final / Disband Committee (See IC 16-13 and 16-14-15) Outgoing Treasurer (After an IC 16-13-14-15 Statement of Organization.)

Check one:
 Pre-Convention
 Post-Convention

12. Reporting Period (mm/dd/yyyy)
From *10-3-18* to *12-31-18*

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 amounts include in-kind contributions and loans, as well as cash contributions.)

| | COLUMN A This Period | COLUMN B Year to Date |
|--|-------------------------|--------------------------|
| 15a. Itemized (Use Schedule A.) | 0 | 0 |
| 15b. Unitemized | 0 | 0 |
| 15c. Add lines 15a and 15b in both columns. | 0 | 0 |
| SUBTOTAL | 0 | 0 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. | 0 | 0 |
| TOTAL | 0 | 0 |

EXPENDITURES

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

| | COLUMN A This Period | COLUMN B Year to Date |
|---|-------------------------|--------------------------|
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) | 0 | 0 |
| 17b. Unitemized | 0 | 0 |
| 17c. Add lines 17a and 17b in both columns. | 0 | 0 |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns) | 0 | 0 |
| 19. Debts OWED BY the committee (Use Schedule D.) | 0 | 0 |
| 20. Debts OWED TO the committee (Use Schedule E.) | 0 | 0 |

CERTIFICATION

FOR OFFICE USE ONLY

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: *Patricia Turner* Title: _____ Date (mm/dd/yyyy): *1-17-19*

Signature of Candidate (if applicable): *Patricia Turner* Date (mm/dd/yyyy): *1-17-19*

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