



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

Slate Form 4606 (R15 / 5-19)
Indiana Election Division (IC 3-9-5-14)

(CFA-4) Summary Sheet

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

FILE NUMBER
TOTAL PAGES IN ENTIRE CFA-4 REPORT
2

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) Committee to Elect Paxson for Prosecutor		<input type="checkbox"/> Check if this is a new name.
2. Acronym or Abbreviated Name (if any)		3. Committee Telephone Number (317) 397-0320
4. Mailing Address (Address where all campaign finance correspondence is received.) PO Box 51		<input type="checkbox"/> Check if this is a new address.
5. City, State, ZIP Code Noblesville, IN 46061		6. Party Affiliation (if applicable) Democrat

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname.) Jessica Dawn Paxson	8. Party Affiliation or If Independent Candidate Democrat
9. Office Sought (include district number, if any. Not required for exploratory committee.) Hamilton County Prosecutor	10. County of Residence Hamilton

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. Check one: <input type="checkbox"/> Pre-Primary <input checked="" type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other _____ <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: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention
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12. Reporting Period (mm/dd/yy): From: 4/9/2022 Through: 7/19/2022	COLUMN 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

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (Use Schedule A.)	\$1280	\$1280
15b. Unitemized	\$995	\$995
15c. Add lines 15a and 15b in both columns. SUBTOTAL	\$1280	\$1280
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL	\$2275	\$2275

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	\$84.16	\$84.16
17c. Add lines 17a and 17b in both columns. SUBTOTAL	\$84.16	\$84.16
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) TOTAL	\$84.16	\$84.16
19. Debts OWED BY the committee (Use Schedule D.)	\$0	
20. Debts OWED TO the committee (Use Schedule E.)	\$0	

CERTIFICATION

FOR OFFICE USE ONLY

IC	I, _____, certify to the best of my knowledge and belief it is true, correct and complete.	
Sk	Title Campaign Treasurer	Date (mm/dd/yy) 07/19/2022
Sk		Date (mm/dd/yy) 07/25/22
Wa	This report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly file (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)	

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OF A POLITICAL COMMITTEE**
State Form 4606 (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 related 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 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's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED <i>(mm/dd/yy)</i>
				RECEIVED BY
1. Matthew Lasher 74 Northshore Drive Burlington, VT 05408 Contributor's Occupation <i>(if required)</i> _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$500	\$500	07/19/22 Karen Walker
2. James Harter 6209 Strathaven Rd Noblesville, IN 46062 Contributor's Occupation <i>(if required)</i> _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$250	\$250	7/19/22 Karen Walker
3. Philip Solbrig 2805 223rd Place Southwest Brier, WA 98036 Contributor's Occupation <i>(if required)</i> _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	\$530	\$530	7/19/22 Karen Walker
4. Contributor's Occupation <i>(if required)</i> _____	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____			
5. Contributor's Occupation <i>(if required)</i> _____	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 1280		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		\$ 1280		