REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R14 / 10-17)
Indiana Election Division (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.
Citizens to Elect Kevin R. Summers Mayor

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

3. Committee Telephone Number
(765) 416-4024

4. Mailing Address *(Address where all campaign finance correspondence is received.)* ☐ Check if this is a new address.
319 Laramie Lane

5. City, State, ZIP Code
Kokomo In 46901

6. Party Affiliation *(if applicable)*
Democrat

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

7. Full Name of Candidate *(Include any nickname.)*
Kevin Ray Summers

8. Party Affiliation or If Independent Candidate
Democrat

9. Office Sought *(Include district number, if any.* ***Not required for exploratory committee.****)*
Mayor - City of Kokomo

10. County of Residence
Howard

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 ten (10) days amend Statement of Organization.)*

CONVENTION CANDIDATES ONLY
Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting Period *(mm/dd/yy)*:
From: 01/01/19 Through: 04/12/19

	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.)*	5097.50	5097.50
15b. Unitemized	5843.—	5843.—
15c. Add lines 15a and 15b in both columns. SUBTOTAL	10,940.50	10,940.50
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL	10,940.50	10,940.50
EXPENDITURES		
(Note: These amounts include in-kind expenditures and loan repayments.)		
17a. Itemized *(Use Schedule B.) (Public Question: use Schedule C.)*	5435.58	5435.58
17b. Unitemized	0	0
17c. Add lines 17a and 17b in both columns. SUBTOTAL	5435.58	5435.58
18. Cash on hand and investments at close of this reporting period *(Subtract 17c from 16 in both columns.)* TOTAL	5504.92	5504.92
19. Debts OWED BY the committee *(Use Schedule D.)*	0	
20. Debts OWED TO the committee *(Use Schedule E.)*	0	

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: Laura Lowman Title: Treasurer Date *(mm/dd/yy)*: 04/19/19

Signature of Candidate *(if applicable)*: Kevin R Summers Date *(mm/dd/yy)*: 4/19/19

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

FILED

APR 22 2019

DEBBIE STEWART
Clerk Howard Cir. Court

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

State
Indiana

(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

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 *(mm/dd/yy)*
Code ____ Tammy Summers 319 Laramie Lane Kokomo In 46902		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	325.68	325.68	3/5/19
Code ____ Chris Beatty ~~765~~ 716 Lakeside Drive Kokomo In 46901		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	19.48	19.48	3/5/19
Code ____ Horoho Printing 500 N Phillips Kokomo In 46901		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	159.97	159.97	3/7/19
Code ____ Clifford Signs 3040 S Lafountain Kokomo In 46902		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	2803.24	2803.24	3/7/19
Code ____ Vickers Graphics PO Box 2525 Kokomo In 46904		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	575.25	575.25	3/7/19
Code ____ UAW Local 685 929 E Hoffer Kokomo In 46902		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:	75-	75-	3/7/19
Code ____		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ____ Purpose:			
		SUBTOTAL THIS PAGE OF SCHEDULE B	$3975.62		
		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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(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

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FILE NUMBER

Page 2 of 2

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 *(mm/dd/yy)*
Code ____ Chuck Wainwright 523 W Markland Kokomo In 46901		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	200 –	200 –	4/9/19
Code ____ Horoho Printing 500 N Phillips Kokomo In 46901		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	729.53	889.50	4/9/19
Code ____ Vickers Graphics PO Box 2525 Kokomo In 46904		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	530.43	1105.68	4/12/19
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	$1459.96		
		TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY *(Enter total on ITEM 17a of the Summary Sheet.)*	$5435.58		

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(CFA-4 SCHEDULE A-5)
CONTRIBUTIONS BY OTHER ORGANIZATIONS
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND 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 other entities OVER $100 per contributor, within a calendar year MUST be itemized on this schedule *(over $200, if regular party committee)*. All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. 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)*.

FILE NUMBER

Page 1 of 1

CONTRIBUTOR'S FULL NAME AND 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. Norris Insurance 3833 S Lafountain Kokomo In 46902	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	200 —	200 —	2/25/19
2. Erik's Chevrolet 1800 S Reed Rd Kokomo In 46902	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	250 —	250 —	2/25/19
3. Norris Jones for Sheriff 2486 S 410 W Russiaville In 46979	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	217.50	217.50	2/26/19
4. Strewsberry Consultants 7321 Shadeland Station, Ste 160 Indpls In 46256	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	220 —	220 —	3/21/19
5.	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 887.50		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*	$		

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Indiana

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

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FILE NUMBER

Page 1 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 *(mm/dd/yy)* / RECEIVED BY
1. Cary Miller 739 S Jay Kokomo In 46901 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	175-	175-	2/25/19 fsl
2. Doug Mason 2345 S 350 W Kokomo In 46902 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	320-	320-	2/25/19 fsl
3. Dave Galloway 1512 Bradley Rd Kokomo In 46902 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	110-	110-	2/25/19 fsl
4. Arletta Reith 2900 N Apperson, Lot 92 Kokomo In 46901 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	500-	1000-	2/25/19 fsl
5. Neil Miller 2333 W Markland Kokomo In 46901 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	500-	500-	3/21/19 fsl
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 1605-		
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1. Matt + Darla Williams 11780 Lakeshore Ct Fort Myers FL 33913 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	500 –	500 –	2/25/19 lsl
2. Arletta Reith 2900 N Apperson, Lot 92 Kokomo In 46901 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	500 –	500 –	2/25/19 lsl
3. Mike Wyant 2317 N Lafountain Kokomo In 46901 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	200 –	200 –	2/25/19 lsl
4. Rhonda Cockrell Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	150 –	150 –	2/25/19 lsl
5. Jami Sharp 121 Meadows Dr Greentown In 46936 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	255 –	255 –	2/25/19 lsl
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 1605		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*	$		

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1. James McConnell 1706 N 300 W Kokomo In 46901 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	500 –	500 –	3/13/19 fsl
2. Doug Mason 2345 S 350 W Kokomo In 46902 Contributor's Occupation *(if required)*	Contributions: ☑ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*	500 –	820 –	3/21/19 fsl
3. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
4. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
5. Contributor's Occupation *(if required)*	Contributions: ☐ Direct ☐ In-Kind *(describe)* Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous *(specify)*			
	SUBTOTAL THIS PAGE OF SCHEDULE A	$ 1000 –		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY *(Enter total on ITEM 15a of the Summary Sheet.)*	$ 4210 –		