

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R17 / 8-23) Indiana Election Division (IC 3-9-5-14)

(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.

2024 OCT 14 P 1: 23

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT? Yes V NO ARSHALL CO. CL	ERK		2	
COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization) Check if this is a new Sandra Dodson for Treasurer Committee	name.			
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number (574) 540-6945			
4. Mailing Address (Address where all campaign finance correspondence is received.) 13947 Ironwood Rd	Check if this	is a new addre	ess.	
5. City, State, ZIP Code Argos IN 46501	6. Party Affiliation (if applicable) Republican			
CANDIDATE INFORMATION (For Candidate's C	Committee	s Only)		
7. Full Name of Candidate (Include any nickname.) Sandra Dodson	8. Party Affiliation or If Independent Candidate Republican			
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Treasurer		10. County of Residence Marshall		
TYPE OF REPORT		COI	NVENTIO	N CANDIDATES ONLY
11. Check one:		Che	ck one:	
☐ Pre-Primary Pre-Election			Pre-Conv	vention
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Utgoing Treasurer (Within ten (10) days amend Sta	tement of Organi	ization.)	Post-Cor	nvention
12. Reporting Period (mm/dd/yy): From: 04/13/2024 Through: 10/11/2024		COLUMN This Peri		COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			50.00	
14. Cash on hand and investments January 1, current year.				0.00
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (Use Schedule A.)			60.00	624.58
15b. Unitemized				
15c. Add lines 15a and 15b in both columns.			60.00	624.58
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL		110.00	624.58
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			0.00	514.58
17b. Unitemized			60.00	60.00
17c. Add lines 17a and 17b in both columns.	TOTAL		60.00	574.58
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL		50.00	50.00
19. Debts OWED BY the committee (Use Schedule D.)			0.00	
20. Debts OWED TO the committee (Use Schedule E.)			0.00	
CERTIFICATION			F	OR OFFICE USE ONLY

CENTIFICATION					
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	Title Treasurer	Date (mm/dd/yy) 10/14/2024			
Signature of Candidate (if applicable)		Date (mm/dd/yy) 10/14/2024			

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)

(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					
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Little Community of the				
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
Marshall County Republican Central Committee P.O. Box 102 Plymouth, IN 46563	Contributions: Direct In-Kind (describe) Candidate Photo Other Receipts: Interest Loan Miscellaneous (specify)	\$60.00	\$60.00	09-13-24 Sandra Dodson
2.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
3.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 60.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$ 60.00		
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