

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

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 V No

(CFA-4) Summary Sheet

FILE_NUMI	BER
TOTAL PAGES IN ENTIR	E CFA-4 REPORT
3	

	£				
COMMITTEE INFORMATION					
Full Name of Committee (as on Statement of Organization) Check if this is a new n Janette for Judge	ame.				
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number				
4. Mailing Address (Address where all campaign finance correspondence is received.)	heck if t	his is a new	address.		
5. Citv. State. ZIP Code		y Affiliation iblican	(if applicable)	***************************************	
CANDIDATE INFORMATION (For Candidate's Co	ommitt	ees Only)			
7. Full Name of Candidate (Include any nickname.) Janette Elaine Surrisi	8. Part		illation or if Independent Candidate		
Office Sought (Include district number, if any. Not required for exploratory committee.) Marshall Circuit Court	10. Co Mars	unty of Resi hall	dence		
TYPE OF REPORT			CONVENTIO	N CANDIDATES ONLY	
11. Check one: Pre-Primary Pre-Dection Annual Nomination Cities Tinal / Disbands Committee (Lines 18, 19, and 20 must be '0'.) Outgoing Treasurer (Within ten (10) days amend Statement of Organization)			Check one:		
12. Reporting Period (mm/dd/yy):	non or org				
From: 10/12/2024 Through: 12/31/2024			UMN A Period	COLUMN B Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.			1,128.99		
14. Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS				0.00	
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)					
15a. Itemized (Use Schedule A.)			386.47	3,446.66	
15b. Unitemized			000.47	J, 17 0.00	
15c. Add lines 15a and 15b in both columns.	OTAL		386.47	3,446.66	
46 Add Bass 40 and 47 to 0.1 to 12 t	OTAL		1,515.46	3,446.66	
EXPENDITURES	OIAL		1,010.40	3,440.00	
(Note: These amounts include in-kind expenditures and loan repayments.)					
17a. itemized (Use Schedule B.) (Public Question: use Schedule C.)		1,515.46		3,446.66	
17b. Unitemized			1,010.10	0,770.00	
17c. Add lines 17a and 17b in both columns.	OTAL		1,515.46	3,446.66	
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	0.00		0.00	
19. Debts OWED BY the committee (Use Schedule D.)		0.00		0.00	
20. Debts OWED TO the committee (Use Schedule E.)			0.00		
CERTIFICATION 1. CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRI Signature of Treasured Signature of Candylate (if applicable)	C	ate (mm/dd	MPLETE ST	OR OFFICE USE ONLY	
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (If files a fraudulent report commits a Level 6 fe/ony. (IC 3-14-1-13) A person who falls to file a complete or accurate Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-0-4-	C 3-9-4-5)	a manifed by	knowingly	State of the state	



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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 fotaled 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).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
MC Republican Central Committee 117 Water Street Plymouth IN 46563	Contributions: Direct In-Kind (describe) Candidate Night	\$283.74	\$343.74	10/20/24
	Other Receipts: Interest Loan Miscellaneous (specify)			Janette Surrisi
² MC Republican Central Committee 117 Water Street Plymouth IN 46563	Contributions: Direct In-Kind (describe) Pilot News	\$102.73	\$446.47	11/15/24
	Other Receipts: Interest Loan Miscellaneous (specify)			Janette Surrisi
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)		5	2025
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)		CO. CL	; :
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL	\$ 386.47			
TOTAL OF ALL PAGES OF SCHEDULE	•			
(Enter total on ITE)	\$ 386.47			



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(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.

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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 Other Swan Lake Resort 5203 Plymouth Laporte Trail Plymouth, IN 46563		Direct In-Kind Payment of Debt Returned Contribution Other Candidate Event Purpose: Paid by MC Rep. Committee	\$283.74	\$283.74	10/20/24
Pilot News Group 218 N. Michigan St. Plymouth IN 46563		☐ Direct ☑ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☑ Other Newpaper Purpose: Pald by MC Rep. Committee	\$102.73	\$102.73	11/15/24
Marshall County GOP 117 Water Street Plymouth IN 46563		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$1,128.99	\$1,528.99	12/31/24
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		2025	·
Code		Direct In-Kind Peyment of Debt Returned Contribution Other Purpose:		JAN 15 A	1
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:		*************************************	
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG	SE OF SCHEDULE B	\$ 1,515.46		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet.)			\$ 1,515.46		