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

**State Form 4606 (R19/11-08)**
Indiana Election Commission (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  ☑ No

### COMMITTEE INFORMATION
1. **Full Name of Committee (as on Statement of Organization)**
   - Friends of Christine Bischoff
2. **Acronym or Abbreviated Name (if any)**
3. **Committee Telephone Number**
   - (317) 332-8811
4. **Mailing Address (address where all campaign finance correspondence is received)**
   - PO Box 17476 Indianapolis, IN 46227
5. **City, State, ZIP Code**
   - Indianapolis, IN 46227
6. **Party Affiliation (if applicable)**
   - Republican
7. **Full Name of Candidate (include any nickname)**
   - Teresa Christine Bischoff
8. **Office Sought (include district number, if any. Not required for exploratory committees)**
   - Marion County Clerk
9. **County of Residence**
   - Marion County

### CANDIDATE INFORMATION (For Candidate’s Committees Only)
- Republican

### TYPE OF REPORT
11. **Check one:**
   - Pre-Primary  ☑ Pre-Election  ☑ Annual  ☑ Nomination  ☑ Other

### CONVENTION CANDIDATES ONLY
12. **Check one:**
   - Pre-Convention  ☑ Post-Convention

### REPORTING PERIOD
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
15. **Add lines 15a through 15o in both columns**
16. **Add lines 15a and 15b in both columns**

### EXPENDITURES
17. **Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)**
   - 0
18. **Debts OWED BY the committee (use Schedule D)**
19. **Debts OWED TO the committee (use Schedule E)**

### 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**

**Signature of Candidate (if applicable)**

**Date**

**Date**

**WARNING:** Any information contained in this report may not be used for sale or used for any commercial purposes (IC 3-9-4-3). A person who knowingly files a fraudulent report commits a Class D felony (IC 3-9-4-13). A person who fails to file a complete or accurate report as required by the Indiana Election Commission may be subject to civil penalties (IC 3-9-4-13, IC 3-9-4-14, IC 3-9-4-15, IC 3-9-4-16).

**FILED**

**JAN 21 2015**

**Myra A. Eldridge**