## SUPPLEMENTAL “LARGE CONTRIBUTION” REPORT
BY A CANDIDATE’S COMMITTEE
($1,000 CONTRIBUTIONS OR MORE)

### INSTRUCTIONS:
Only candidates receiving a “large contribution” are required to file this report. 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.

### COMMITTEE INFORMATION
1. Full Name of Candidate (include any nickname) ☐ Check if this is a new name
   **EMMITT CULVER**

2. Committee Telephone Number
   (317) 635-8881

3. Mailing Address (address where all campaign finance correspondence is received)
   ☐ Check if this is a new address
   **542 S TINGLE OFF CT**

4. City
   **INDY**

5. State
   **IN**

6. ZIP Code
   **46204**

7. Party Affiliation or If Independent Candidate
   **REPUBLICAN**

8. Office Sought (include district number, if any. Not required for exploratory committee.)
   **SHERIFF**

9. County of Residence
   **MARION**

10. Reporting Period:
    From: **04/12/14**  Through: **10/10/14**

For classification, enter INDIVIDUAL for individual; PAC for political action committee; CORP for corporation; LAB for labor organization; NONE for all entries which are not one of the above categories.

### CONTRIBUTOR’S FULL NAME AND OCCUPATION

<table>
<thead>
<tr>
<th>Classification</th>
<th>FULL MAILING ADDRESS</th>
<th>TYPE OF CONTRIBUTION OR OTHER RECEIPT</th>
<th>COLUMN AMOUNT OF CONTRIBUTION</th>
<th>DATE RECEIVED</th>
</tr>
</thead>
</table>
| 1.            | **METHVEN**
                47 S. PENNSYLVANIA ST
                **Suite 200**
                **INDY, IN 46204**
                Contributor's Occupation (if applicable)
                **INFORMATION SECURITY SPECIALIST**
                Contributions:
                ☐ Direct
                ☐ In-Kind (describe)
                ☐ Other Receipts:
                ☐ Interest ☐ Loan
                ☐ Misc (specify)
                ☐ Amount Received: **$5,000**  **10/30/14**

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**CERTIFICATION**

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

<table>
<thead>
<tr>
<th>Signature of Treasurer</th>
<th><strong>TAKE</strong></th>
<th>Date (MM-DD-YY)</th>
<th><strong>10/22/14</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of Candidate (if applicable)</td>
<td><strong>TAKE</strong></td>
<td>Date (MM-DD-YY)</td>
<td><strong>10/22/14</strong></td>
</tr>
</tbody>
</table>

**WARNING:**
Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-4) A person who knowingly files a fraudulent report commits a Class D 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, and IC 3-9-4-18)