

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

State Form 4606 (R13/11-05)
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 [X] No

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### COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) [ ] Check if this is a new name
   
   **Dreyer for Judge Committee**

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number
   
   (317) 259-4085

4. Mailing Address (address where all campaign finance correspondence is received) [X] Check if this is a new address
   
   5133 N. Capitol

5. City, State, ZIP Code
   
   Indianapolis, IN 46208

6. Party Affiliation (if applicable)
   
   Democrat

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

7. Full Name of Candidate (include any nickname)
   
   David J. Dreyer

8. Party Affiliation or If Independent Candidate
   
   Democrat

9. Office Sought (Include district number, if any. Not required for exploratory committee.)
   
   Marion Superior Court

10. County of Residence
    
    Marion

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### TYPE OF REPORT

11. Check one:

   [ ] Pre-Primary  [ ] Pre-Election  [ ] Annual  [ ] Nomination  [ ] Other

   X Final/Dissbands Committee (lines 11a, 11b, and 11c must be '0')

   [ ] Outgoing Treasurer (within 10 days amend Statement of Organization)

12. Reporting Period:

   From: January 1, 2015 Through: March 24, 2015

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### COLUMN A

<table>
<thead>
<tr>
<th>This Period</th>
<th>Year to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>2800.00</td>
<td>2800.00</td>
</tr>
</tbody>
</table>

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### COLUMN B

<table>
<thead>
<tr>
<th>This Period</th>
<th>Year to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>2800.00</td>
<td>2800.00</td>
</tr>
</tbody>
</table>

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### CONTRIBUTIONS AND RECEIPTS

(Note: These amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)
   
   0

15b. Unitemized
   
   0

15c. Add lines 15a and 15b in both columns
   
   SUBTOTAL 0 0

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B
   
   TOTAL 2800.00 2800.00

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### EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)
   
   2800.00 2800.00

17b. Unitemized
   
   2800.00 2800.00

17c. Add lines 17a and 17b in both columns
   
   SUBTOTAL 2800.00 2800.00

18. Cash on hand and investments at close of this reporting period (subtract 17c from 18 in both columns)
   
   TOTAL 0 0

19. Debts OWED BY the committee (use Schedule D)
   
   0

20. Debts OWED TO the committee (use Schedule E)
   
   0

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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.

**Signature of Treasurer**

**Title**

**Date** 3/24/15

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**Signature of Candidate (if applicable)**

**Date** 3/24/15

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**FILE NUMBER**

**TOTAL PAGES IN ENTIRE CFA-4 REPORT**

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**FILED**

MAR 24 2015

"Molly A. Sheadig"
**REPORT OF RECEIPTS AND EXPENDITURES**
**OF A POLITICAL COMMITTEE**
State Form 408 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**ITEMIZED EXPENDITURES**
(CFA-4 SCHEDULE B)

**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 committees). 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.

<table>
<thead>
<tr>
<th>RECIPIENT'S NAME AND MAILING ADDRESS</th>
<th>RECIPIENT'S OCCUPATION</th>
<th>TYPE OF EXPENDITURE AND PURPOSE (be specific)</th>
<th>COLUMN A AMOUNT THIS PERIOD</th>
<th>COLUMN B CUMULATIVE YEAR-TO-DATE</th>
<th>DATE OF EXPENDITURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code <strong>C</strong></td>
<td></td>
<td>XDirect □ In-Kind □ Payment of Debt □ Returned Contribution □ Other: Charitable contribution</td>
<td>1300.00</td>
<td>1300.00</td>
<td>3/1/15</td>
</tr>
<tr>
<td>Kennedy King Memorial Initiative, Inc.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>617 E. 17th</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indianapolis, IN 46202</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Code <strong>C</strong></td>
<td></td>
<td>XDirect □ In-Kind □ Payment of Debt □ Returned Contribution □ Other: Charitable contribution</td>
<td>1500.00</td>
<td>1500.00</td>
<td>3/23/15</td>
</tr>
<tr>
<td>Holy Cross College</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Notre Dame, IN 46556</td>
<td></td>
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</tr>
<tr>
<td>Code __</td>
<td></td>
<td>□ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other:</td>
<td></td>
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<td></td>
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<tr>
<td>Code __</td>
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<tr>
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<td>□ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other:</td>
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</tr>
<tr>
<td>Code __</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
INSTRUCTIONS FOR COMPLETING THIS FORM

FILE NUMBER: Enter the file number assigned by the Election Division or County Election Board. Also indicate the number of pages used to complete this schedule. For example, “Page 2 of 2.” This means that this page is second page of two pages used for this schedule.

RECIPIENT’S NAME AND MAILING ADDRESS: Enter the full name and mailing address of each person or vendor to whom one (1) or more disbursements in an aggregate amount exceeding $100 ($200 if regular party committee) have been made.

ALSO

Enter the full name and mailing address of each political committee that has received a transfer-out from the reporting committee. The reporting requirement of a transfer-out from a political committee is different from the reporting requirement of an expenditure to a person. Each transfer-out, regardless of amount, must be itemized.

NOTE: Under normal circumstances, you should not list a credit card issuer as a recipient. If making a payment on a credit card, list vendor, NOT the credit card company. Also note that any unpaid credit obligation should be listed on Schedule D, “Debts Owed By This Committee.”

EXPENDITURE CODES: In the box at the upper left corner of the “Recipient’s Name and Mailing Address” section, enter the expenditure code for each entry from the following list of codes:

Code: C
Expenditure Type: Contributions

Expenditure Definition: Direct and in-kind contributions the campaign can legally make to other campaigns, political action committees, community and charitable organizations. In the description column, the filer is directed to specify who benefited and, if in-kind, what was purchased.

Code: F
Expenditure Type: Fundraising

Expenditure Definition: Expenditures, direct or in-kind, associated with holding a fundraiser, including payments to restaurants, hotels and caterers, other food and refreshment vendors, entertainers, and speakers.

*Filers are directed to use an “A” for expenditures for printed matter produced in connection with fundraising events.

Code: A
Expenditure Type: Advertising

Expenditure Definition: Expenditures associated with the production, design, photography, copy, layout, printing, reproduction and purchase of advertising and campaign communications including:

- Radio and television advertising
- Advertising in newspapers, periodicals, and other publications
- Advertising on billboards and yard signs
- Campaign paraphernalia such as buttons, bumper stickers, T-shirts, hats, etc.
- Websites
- Campaign literature
- Printed solicitations
- Fundraising letters

- Mailing lists

Code: O
Expenditure Type: Operations

Expenditure Definition: General campaign operating expenses and overhead including:

- Wages, salaries and benefits associated with hiring campaign employees and other paid workers who provide miscellaneous services
- Contracts, fees, and commissions paid to campaign management companies and contract consultants including law firms
- Headquarters purchase or rental
- Utilities
- Purchase or rental of office equipment and furniture for the campaign
- Surveys and Polls – Including expenditures associated with the design and production of polls, election trend reports, voter surveys, telemarketing, telephone banks, Get Out The Vote drives, etc.
- Postage – including stamps, or metered postage, direct mail services and delivery services like United Parcel Services and Federal Express
- Travel – including fares, accommodations, and meals from campaign trips

RECIPIENT’S OCCUPATION/OFFICE SOUGHT: Enter the recipient’s occupation, and if applicable, the office sought. For example, “printer” or “candidate, State Representative District 5.”

TYPE OF EXPENDITURE: Check the type of expenditure. For "other", describe the type of expenditure.

PURPOSE OF EXPENDITURE: Enter the purpose of the expenditure or transfer-out. Be specific. Indicate any reimbursement.

COLUMN A AMOUNT THIS PERIOD: Enter the amount of each expenditure and transfer-out, including in-kind for this reporting period.

COLUMN B CUMULATIVE YEAR-TO-DATE: Enter the cumulative expenditure and transfer-out, including in-kind for calendar year-to-date.

On the first report of each calendar year, the entry in Column B is the same as the entry in Column A. 

DATE OF EXPENDITURE: Enter the month, day, and year of the expenditure or transfer-out. Use the following guidelines to determine the proper date to use:

FOR USE

Payment of bill The date the bill was actually paid (by placing a check in the mail or tendering cash in person).
Transfer-out The date the check was written to a candidate’s, legislative caucus, political action, or regular party committee.
In-kind The date the material was given or service provided.

SUBTOTAL OF THIS PAGE OF SCHEDULE B: Enter the subtotal for this page of Schedule B. If there is only one page of this schedule, enter the amount of the last page of Schedule B.

SUBTOTAL THIS PAGE OF SCHEDULE B $2800.00
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY
(Enter total on ITEM 17a of the Summary Sheet) $2800.00