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

**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)  
☐ Check if this is a new name
    Hall Render Killian Heath & Lyman Employee Political Action Committee

2. Acronym or abbreviated name, if any  
Hall Way PAC

3. Committee telephone number  
(317) 633-4884

4. Mailing address (address where all campaign finance correspondence is received)  
☐ Check if this is a new address
   ONE AMERICAN SQUARE, STE. 2000
   INDIANAPOLIS IN 46282

5. City, state, ZIP code  
   INDIANAPOLIS IN 46282

6. Party affiliation (if applicable)

**CANDIDATE INFORMATION** (For Candidate’s Committee Only)

7. Full name of candidate (include any nickname)  

8. Party affiliation or if independent

9. Office sought (include district number, if any. Not required for exploratory committee.)

10. County of residence

**TYPE OF REPORT**

11. Annual

12. Reporting period:  
   From: 10/11/2014  
   Through: 12/31/2014

13. Cash on hand and investments at the beginning of this reporting period:

14. Cash on hand and investments January 1, current year:

**CONTRIBUTIONS AND RECEIPTS**

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

15a. Itemized (use Schedule A)  
15b. Unitemized  
15c. Add lines 15a, and 15b in both columns  
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

**EXpenditures**

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

17a. Itemized (use Schedule B) (Public Question: use Schedule C)  
17b. Unitemized  
17c. Add lines 17a and 17b in both columns  
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)  
19. Debts OWED BY the committee (use Schedule D)  
20. 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 Included  
Title  
Treasurer  
Date  
01/13/2015

Signature of Candidate (if applicable)  
Signature Included  
Date  
01/13/2015

**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, 3-9-4-17, 3-9-4-18.)

**FILE NUMBER**  
6180

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

**CFA-4**

**Summary Sheet**

**Filed:** Online  
1/13/15 8:50 am

**Filed:** JAN 13 2015

**FOR OFFICE USE ONLY**

Myle A. Eldridge
<table>
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<tr>
<th>Contributor's Full Name and Occupation</th>
<th>Type of Contribution or Other Receipt</th>
<th>Column A Amount This Period</th>
<th>Column B Cumulative Year-to-Date</th>
<th>Date Received</th>
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SUB TOTAL THIS PAGE OF SCHEDULE A $188.44

TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY ($ Enter total on ITEM 15a of the Summary Sheet) $
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<th>Contributor's Full Name and Occupation</th>
<th>Type of Contribution or Other Receipt</th>
<th>Column A Amount This Period</th>
<th>Column B Cumulative Year-to-Date</th>
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1704 Longwood Circle  
Goshen KY 40026 | Contribution: Direct | 41.15 | 987.60 | 11/21/2014 | J. Ullom |
| Contributor's Occupation (if required): Attorney/Legal - |
| 2 Brian Bauer  
12935 Paradise Drive  
DeWitt MI 48820 | Contribution: Direct | 35.38 | 884.50 | 12/05/2014 | J. Ullom |
| Contributor's Occupation (if required): Attorney/Legal - |
| 3 William D Roberts  
1704 Longwood Circle  
Goshen KY 40026 | Contribution: Direct | 41.15 | 1,028.75 | 12/05/2014 | J. Ullom |
| Contributor's Occupation (if required): Attorney/Legal - |
| 4 Brian Bauer  
12935 Paradise Drive  
DeWitt MI 48820 | Contribution: Direct | 35.38 | 919.88 | 12/19/2014 | J. Ullom |
| Contributor's Occupation (if required): Attorney/Legal - |
| 5 William D Roberts  
1704 Longwood Circle  
Goshen KY 40026 | Contribution: Direct | 41.15 | 1,069.90 | 12/19/2014 | J. Ullom |
| Contributor's Occupation (if required): Attorney/Legal - |

Sub Total This Page of Schedule A: $194.21
Total of All Pages of Schedule A on the Last Page Only: $382.85
(Enter total on Item 15a of the Summary Sheet)
# REPORT OF RECEIPTS AND EXPENDITURES

OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-06)
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 schedule, see instructions on the reverse side. This schedule is used to document expenditures titled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities over $150 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.

<table>
<thead>
<tr>
<th>FILE NUMBER</th>
<th>6180</th>
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<td>Page 1 of 1</td>
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<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>
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<td>Purpose: Campaign Contribution</td>
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<tr>
<td>4300 N Manchester Road</td>
<td>Mayor of Muncie</td>
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<tr>
<td>Muncie IN 47304</td>
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| SUB TOTAL THIS PAGE OF SCHEDULE B   | $1,000.00              |                                               |                            |                                  |                     |

| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet) | $1,000.00 |