**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  ❏ No

**COMMITTEE INFORMATION**

1. Full Name of Committee (as on Statement of Organization)  ❏ Check if this is a new name

   Hoosiers For Joven

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(   )

4. Mailing Address (address where all campaign finance correspondence is received)  ❏ Check if this is a new address

   11871 Challenge Ct.

5. City, State, ZIP Code

   Indianapolis, IN 46236

6. Party Affiliation (If applicable) Republican

   Republican

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

7. Full Name of Candidate (include any nickname)

   James A Joven

8. Party Affiliation or If Independent Candidate

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

   Marion County Superior Court Judge

10. County of Residence - Marion

**TYPE OF REPORT**

11. Check one:

   - Pre-Primary
   - Pre-Election
   - Annual  ❏ Nomination
   - Other

   Final/Dissbands Committee (lines 18, 19, and 20 must be '0')  ❏ Outgoing Treasurer (within 10 days amend Statement of Organization)

12. Reporting Period:

   From: 1/1/14  Through: 12/31/14

   **CASH ON HAND**

   Column A  Column B

   This Period  Year to Date

   Cash on hand and investments at the beginning of this reporting period.  $501.23  $501.23

   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

   **SUBTOTAL** $501.23  $501.23

   Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

   **TOTAL**  $501.23  $501.23

   **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

   **SUBTOTAL**  $501.23  $501.23

   Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

   **TOTAL**  $23,652.25

   Debts OWED BY the committee (use Schedule D)

   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  ❏ Date 01/14/2015

   Signature of Candidate (if applicable)  ❏ Date

   **WARNING:** Any information contained in this report may be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-4) 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, IC 3-9-4-18)

   FILED

   JAN 20 2015

   Myra A. Eldridge
**REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE**

(CFA-4 SCHEDULE D)

DEBTS OWED BY THIS COMMITTEE

**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. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER’S column. A lender’s occupation is required if an individual makes loans of at least $1,000 during the calendar year. Otherwise, this is optional.

<table>
<thead>
<tr>
<th>CREDITOR’S OR LENDER’S NAME &amp; MAILING ADDRESS (street, number, city, state, ZIP code)</th>
<th>ENDORSER’S OR VENDOR’S NAME &amp; MAILING ADDRESS (if any) (street, number, city, state, ZIP code)</th>
<th>AMOUNT</th>
<th>DATE DEBT INCURRED</th>
<th>NATURE OF DEBT</th>
<th>CUMULATIVE PAID YEAR-TO-DATE</th>
<th>OUTSTANDING BALANCE THIS PERIOD</th>
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<tbody>
<tr>
<td>James A. Joven 11871 Challenge Ct. Indianapolis, IN 46236</td>
<td></td>
<td>Documented on previous reports</td>
<td></td>
<td>Loan</td>
<td>$0.00</td>
<td>$23,652.25</td>
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<th>SUBTOTAL THIS PAGE OF SCHEDULE D</th>
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<td>$23,652.25</td>
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<th>TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)</th>
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<td>$23,652.25</td>
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