REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE
State Form 4606 (R1311-05)
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

(CFA-4)
Summary Sheet

FILE NUMBER
STEINER, MARK

TOTAL PAGES IN ENTIRE CFA-4 REPORT
4

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

MARK STEINER FOR CONSTABLE

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(317) 260-3455

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

891 E 21ST STREET

5. City, State, ZIP Code

INDIANA IN 46219

6. Party Affiliation (if applicable)

REPUBLICAN

CANDIDATE INFORMATION (For Candidate's Committees Only)
7. Full Name of Candidate (include any nickname)

MARK ROBERT STEINER

8. Party Affiliation or If Independent Candidate

REPUBLICAN

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

CONSTABLE WARREN TOWNSHIP

10. County of Residence

MARION

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. Check one:

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

ACT CLOSED

[ ] Final/Disbands Committee (lines 18, 19, and 20 must be "0") [ ] Outgoing Treasurer (within 10 days amend Statement of Organization)

12. Reporting Period:


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

25.00

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

COLUMNA This Period

25.00

COLUMN B Year to Date

25.00

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

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

TOTAL

0

EXPENDITURES

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

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

25.00 Open Acct

17b. Unitemized

0

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

SUBTOTAL

25.00 Close Acct

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

TOTAL

0

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

0

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

0

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

Signature of Candidate (if applicable)

Date

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-9) 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, IC 3-9-4-18)

MYLA A. ELMERIDGE

JAN 20 2015

FILED
**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 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 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.**

**FILE NUMBER**

<table>
<thead>
<tr>
<th>NAME</th>
<th>STEINER MARK</th>
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<th>Code</th>
<th>MARK R STEINER</th>
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<tr>
<th>Code</th>
<th>BROOKLYN ST.</th>
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<th>INDIANAPOLIS IN 46219</th>
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<tr>
<th>Recipient's Name and Mailing Address (street, number, city, state, ZIP code)</th>
<th>Recipient's Occupation (if applicable)</th>
<th>Type of Expenditure (be specific)</th>
<th>Column A: Amount This Period</th>
<th>Column B: Cumulative Year-to-Date</th>
<th>Date of Expenditure</th>
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</thead>
<tbody>
<tr>
<td>Code</td>
<td>MARK R STEINER</td>
<td>BROOKLYN ST.</td>
<td>INDIANAPOLIS IN 46219</td>
<td>Direct</td>
<td>In-Kind</td>
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**SUBTOTAL THIS PAGE OF SCHEDULE B $ 0**

**TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY**

(Enter total on ITEM 17a of the Summary Sheet) $ 0