



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)
Summary Sheet

FILE NUMBER

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.

TOTAL PAGES IN ENTIRE CFA-4 REPORT

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
FRIENDS FOR TYLER MOORE

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number
(765) 866-8745

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

5. City, State, ZIP Code
KOKOMO IN 46901

6. Party Affiliation (if applicable)
REPUBLICAN

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)
TYLER OWEN MOORE

8. Party Affiliation or If Independent Candidate
REPUBLICAN

9. Office Sought (Include district number, if any. Not required for exploratory committee.)
COUNTY COMMISSIONER - DISTRICT 2

10. County of Residence
HOWARD

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. Check one:
 Pre-Primary Pre-Election Annual Nomination Other _____
 Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement of Organization)

Check one:
 Pre-Convention
 Post-Convention

| 12. Reporting Period: | COLUMN A This Period | COLUMN B Year to Date |
|---|-------------------------|--------------------------|
| From: 4-16-2016 Through: 10-14-2016 | | |
| 13. Cash on hand and investments at the beginning of this reporting period. | 7.00 | |
| 14. Cash on hand and investments January 1, current year. | | 2.00 |

CONTRIBUTIONS AND RECEIPTS

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

| | | |
|---|-----------------|-----------------|
| 15a. Itemized (use Schedule A) | 8727.71 | 8727.71 |
| 15b. Unitemized | 490.00 | 495.00 |
| 15c. Add lines 15a and 15b in both columns | 9217.71 | 9222.71 |
| SUBTOTAL | 9217.71 | 9222.71 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B | 9,224.71 | 9,224.71 |
| TOTAL | 9,224.71 | 9,224.71 |

EXPENDITURES

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

| | | |
|---|----------------|----------------|
| 17a. Itemized (use Schedule B) (Public Question: use Schedule C) | 8804.74 | 8804.74 |
| 17b. Unitemized | 184.00 | 184.00 |
| 17c. Add lines 17a and 17b in both columns | 8988.74 | 8988.74 |
| SUBTOTAL | 8988.74 | 8988.74 |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) | 235.97 | 235.97 |
| TOTAL | 235.97 | 235.97 |
| 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 <i>[Signature]</i> | Title CANDIDATE | Date 10-14-16 |
| Signature of Candidate (if applicable) <i>[Signature]</i> | | Date 10-14-16 |

WARNING: Any information contained in this report may not 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 3-14-1-13) 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)

FOR OFFICE USE ONLY
FILED

OCT 14 2016

KIM WILSON
Clerk Howard Cir. Court



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

| |
|---------------------------|
| FILE NUMBER |
| Page <u>1</u> of <u>5</u> |

| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i> | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED |
|--|---|-----------------------------------|--|-------------------------------|
| | | | | RECEIVED BY |
| 1. ROBERT LETBRICH 8230 CENTRAL AVE. INDIANAPOLIS, IN 46240 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | \$250.00 | \$250.00 | 5/9/16 TYLER MOORE |
| 2. PATRICK & SUE MCGANIK 2386 S. 300 E. KOKOMO, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | \$100.00 | \$100.00 | 6/15/16 TYLER MOORE |
| 3. MIKE KARICKHOFF 2504 GOENTZES W. KOKOMO, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | \$300.00 | \$300.00 | 6/15/16 TYLER MOORE |
| 4. LARRY & SUE MURRELL 3118 ENCLINE CT KOKOMO, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | \$100.00 | 100.00 | 6/15/16 TYLER MOORE |
| 5. STEPHEN KILEY 3422 WOODHAVEN TR. KOKOMO, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/22/16 TYLER MOORE |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | \$850.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY <i>(Enter total on ITEM 15a of the Summary Sheet)</i> | | \$3952.66 | | |



REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE
State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 2 of 5

| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code) | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED |
|--|---|-----------------------------------|--|-------------------------------|
| | | | | RECEIVED BY |
| 1. DEN AND MARJORIE WELGT 615 WILLIAMS BURG DR. Kokomo, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/24/16 TYLER MOORE |
| 2. JOHN AND LORI FEUNTUN 4403 CHRISTOPHER DR. Kokomo, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/22/16 TYLER MOORE |
| 3. TODD AND RHODA REYBURN 4504 W. 50 S. Kokomo, IN 46901 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/22/16 TYLER MOORE |
| 4. J. CONRAD AND JILLIAN MARGAS 3274 WOODHAVEN TR. Kokomo, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/22/16 TYLER MOORE |
| 5. THOMAS SHEEHAN 1753 WATERVIEW WAY Kokomo, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/20/16 TYLER MOORE |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | \$ 500.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet) | | \$ | | |



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 3 of 5

| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code) | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED RECEIVED BY |
|---|---|-----------------------------------|--|---------------------------------|
| 1. THOMAS MIKLIK 2300 W. MAPLE KOKOMO, IN 46901 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 8/22/16 TYLER MOORE |
| 2. CHARLES AND THERESA HOBSON 324 S. DIXON RD. KOKOMO, IN 46901 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/22/16 TYLER MOORE |
| 3. MICHAEL AND ERICA MOORE 1511 BRAMCOER DR. KOKOMO, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/22/16 TYLER MOORE |
| 4. RYAN AND JULIA POWELL 5605 HIDDEN VALLEY DR. RUSSIAVILLE, IN 46979 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 250.00 | 250.00 | 9/22/16 TYLER MOORE |
| 5. DANIS RATE 1618 BRAMCOER DR. KOKOMO, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/23/16 TYLER MOORE |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | \$ 650.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet) | | \$ | | |



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**
State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 4 of 5

| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code) | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED |
|--|---|-----------------------------------|--|-------------------------------|
| | | | | RECEIVED BY |
| 1. STEVEN JOHANSON 3122 EMERALD BLVD. Kokomo, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/27/16 TYLER MEERZ |
| 2. MATTHEW AND KRISTEN PATE 3337 TULBER VALLEY Kokomo, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/23/16 TYLER MEERZ |
| 3. PHILLIP PATE 2705 S. BORKLEY, STE B. Kokomo, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/23/16 TYLER MEERZ |
| 4. MICHAEL MAHER 3266 WOODHAVEN TRAIL Kokomo, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 300.00 | 300.00 | 9/22/16 TYLER MEERZ |
| 5. SUSAN MAHER 3266 WOODHAVEN TRAIL Kokomo, IN 46902 Contributor's Occupation (if required) _____ | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 300.00 | 300.00 | 9/22/16 TYLER MEERZ |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | \$ 900.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet) | | \$ | | |



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

| FILE NUMBER | |
|-------------|--------|
| Page | 5 of 5 |

| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code) | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED |
|--|---|-----------------------------------|--|-------------------------------|
| | | | | RECEIVED BY |
| 1. ROBERT AND JAMIE DINN 5575 MACKINAW WAY KOKOMO, IN 46902 Contributor's Occupation (if required) | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 500.00 | 500.00 | 9/22/16 TYLER MOORE |
| 2. PAUL WYMAN 1533 W. LINCOLN RD. KOKOMO, IN 46902 Contributor's Occupation (if required) | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 302.66 | 302.66 | 9/22/16 TYLER MOORE |
| 3. BRYAN AND SUSAN KIRKPATRICK 13961 E. 380 S. GREENTOWN, IN 46936 Contributor's Occupation (if required) | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 150.00 | 150.00 | 9/20/16 TYLER MOORE |
| 4. JAMES AND JEROMARIE FERENC 1560 FOXHAYEN DR. KOKOMO, IN 46902 Contributor's Occupation (if required) | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 100.00 | 100.00 | 9/27/16 TYLER MOORE |
| 5. Contributor's Occupation (if required) | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | \$ 1052.66 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet) | | \$ | | |



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-2)
CONTRIBUTIONS BY CORPORATIONS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

Page 1 of 1

| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code) | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED RECEIVED BY |
|--|--|--------------------------------|-------------------------------------|--|
| 1. <u>BARNES & THORN BUILDS</u> <u>11 SOUTH MERIDIAN ST.</u> <u>INDIANAPOLIS, IN 46202</u> | Contributions: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) <u>CHECKS</u> Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 1,000.00 | 1,000.00 | 6-15-16 TYLER MOORE |
| 2. <u>MOORE TITLE & ESCROW, INC.</u> <u>1215 E. HOFFER ST</u> <u>Kokomo, IN 46902</u> | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | 850.00 | 850.00 | 6/23/16, 10/11/16 TYLER MOORE |
| 3. <u>MOORE TITLE & ESCROW, INC.</u> <u>1215 E. HOFFER ST.</u> <u>Kokomo, IN 46902</u> | Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) <u>PARADE TABLES, POSTAGE,</u> <u>TRAIL STICES</u> Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | \$ 775.05 | \$ 775.05 | VARIOUS DATES TYLER MOORE |
| 4. <u>WYMAN GROUP</u> <u>1533 W LINCOLN RD</u> <u>Kokomo, IN 46902</u> | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | \$ 200.00 | \$ 200.00 | 6/23/16 TYLER MOORE |
| 5. XXXXXXXXXXXX <u>fill</u> | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | \$ 2,825.05 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet) | | \$ 2,825.05 | | |



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-3)
CONTRIBUTIONS BY
LABOR ORGANIZATIONS**

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

Page of

| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code) | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED RECEIVED BY |
|---|--|--|-------------------------------------|------------------------------|
| 1. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____ | | | |
| 2. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____ | | | |
| 3. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____ | | | |
| 4. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____ | | | |
| 5. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____ | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | \$ <u> </u> <u> </u> <u> </u> | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet) | | \$ <u> </u> <u> </u> <u> </u> | | |



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-4)
CONTRIBUTIONS BY
POLITICAL ACTION COMMITTEES
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. 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 contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

Page 1 of 1

| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i> | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED |
|---|---|--------------------------------|-------------------------------------|----------------------------|
| | | | | RECEIVED BY |
| 1. INDIANA REACTORS POLITICAL ACTION COMMITTEE 7301 N. SHADELAND AVE. INDIANAPOLIS, IN 46250 | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____ | 1,500.00 | 1,500.00 | 10/09/16 TYLER NEEDS |
| 2. HOMEBUILDERS ASSOCIATION OF HOWARD COUNTY - PAC P.O. BOX 1187 KOKOMO, IN 46903-1187 | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____ | \$200.00 | \$200.00 | 10/3/16 TYLER NEEDS |
| 3. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____ | | | |
| 4. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____ | | | |
| 5. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____ | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | \$ 1,700.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY <i>(Enter total on ITEM 15a of the Summary Sheet)</i> | | \$ 1,700.00 | | |



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

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

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

Page 1 of 1

| RECIPIENT'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i> | RECIPIENT'S OCCUPATION | TYPE OF EXPENDITURE and PURPOSE <i>(be specific)</i> | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE OF EXPENDITURE |
|---|--------------------------------------|--|-----------------------------------|--|------------------------|
| | OFFICE SOUGHT <i>(if applicable)</i> | | | | |
| Code <u>C</u> HOWARD COUNTY REPUBLICAN PARTY | POLITICAL PARTY N/A | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | \$950.00 | \$950.00 | 5/12/16 10/14/16 |
| Code <u>A</u> EXPRESSIONS DESIGN 500 N. MAIN KOKOMO, IN 46901 | RETAIL PROMOTIONS N/A | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | \$950.70 | \$950.70 | 6/23/16, 7/21/16 |
| Code <u>A</u> HALL PROMOS 40 MAIN ST CENTERBROOK, CT 06409 | RETAIL PROMOTIONS N/A | <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | \$636.05 | \$636.05 | 6/29/16 |
| Code <u>A</u> KOKOMO PERSPECTIVE 209 NORTH MAIN ST. KOKOMO, IN 46901 | NEWSPAPER N/A | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | \$1110.00 | \$1110.00 | 4/27/16 5/25/16 |
| Code <u>A</u> CLIFFORD SIGNS 1115 E MARKLAND AVE KOKOMO, IN 46901 | PROMOTIONS DESIGN N/A | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | \$2885.58 | \$2885.58 | 10/1/16 |
| Code <u>A</u> BURKHART ADVERTISING 1475 NAVCO DRIVE LAFAYETTE, IN 47905 | ADVERTISING/ BILLBOARDS N/A | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | \$2272.41 | \$2272.41 | 10/3/16 |
| Code _____ | | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE B | | | \$3804.74 | | |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY <i>(Enter total on ITEM 17a of the Summary Sheet)</i> | | | \$8804.74 | | |



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE C)
ITEMIZED EXPENDITURES
For Public Questions**

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. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

FILE NUMBER

Page 1 of 1

PUBLIC QUESTION INFORMATION

Enter Text of Public Question

Type of Question: Statewide Local

Position: Supported Opposed

| RECIPIENT'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i> | RECIPIENT'S OCCUPATION | TYPE OF EXPENDITURE and PURPOSE <i>(be specific)</i> | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE OF EXPENDITURE |
|--|------------------------|--|-----------------------------------|--|------------------------|
| Code _____ | | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | | | |
| Code _____ | | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | | | |
| Code _____ | | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | | | |
| Code _____ | | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | | | |
| Code _____ | | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | | | |
| Code _____ | | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE C | | | \$ 00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE C ON THE LAST PAGE ONLY <i>(Enter total on ITEM 17a of the Summary Sheet)</i> | | | \$ 00 | | |



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(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.

| |
|-----------------------------------|
| FILE NUMBER |
| |
| Page <u> 1 </u> of <u> 1 </u> |

| CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i> | ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS <i>(if any)</i> <i>(street, number, city, state, ZIP code)</i> | AMOUNT | DATE DEBT INCURRED | CUMULATIVE PAID YEAR-TO-DATE | OUTSTANDING BALANCE THIS PERIOD |
|--|--|----------------|-----------------------|------------------------------------|---------------------------------------|
| | | NATURE OF DEBT | | | |
| LENDER'S OCCUPATION: | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| LENDER'S OCCUPATION: | | | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE D | | | | | \$ - 0 - |
| TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY <i>(Enter total on ITEM 19 of the Summary Sheet)</i> | | | | | \$ - 0 - |



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

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE E)
DEBTS OWED TO THIS COMMITTEE**

FILE NUMBER

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 TO** the committee during the reporting period. Include all amounts the committee has loaned to others.

Page 1 of 1

| BORROWER'S NAME & MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i> | CO-SIGNER'S NAME & MAILING ADDRESS <i>(if any)</i> <i>(street, number, city, state, ZIP code)</i> | ORIGINAL AMOUNT | DATE DEBT INCURRED | CUMULATIVE PAID YEAR-TO-DATE | OUTSTANDING BALANCE THIS PERIOD |
|--|---|-----------------|-----------------------|------------------------------------|---------------------------------------|
| | | NATURE OF DEBT | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE E | | | | | \$ <u>00</u> |
| TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY <i>(Enter total on ITEM 20 of the Summary Sheet)</i> | | | | | \$ <u>00</u> |



**SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT
BY A CANDIDATE'S COMMITTEE
(\$1,000 CONTRIBUTIONS OR MORE)**

(CFA-11)

State Form 48492 (R4/11-05)
Indiana Election Commission (IC 3-9-5-20.1; 3-9-5-22)

FILE NUMBER

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.

**TOTAL PAGES IN ENTIRE CFA-11
REPORT**

COMMITTEE INFORMATION

1. Full Name of Candidate (include any nickname) Check if this is a new name
TYLER OWEN MOORE

2. Committee Telephone Number
(765) 866-8745

3. Mailing Address (address where all campaign finance correspondence is received) Check if this is a new address
517 TUMBLEWEED DR.

4. City **KOKOMO** State **IN** ZIP Code **46901**

5. Party Affiliation or If Independent Candidate
REPUBLICAN

6. Office Sought (include district number, if any. Not required for exploratory committee.)
COUNTY COMMISSIONER - DISTRICT 2

7. County of Residence
HOWARD

8. Reporting Period:
From: **4-16-2016** Through: **10-14-2016**

For classification, enter INDV 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.

| Classification | CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code) | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT OF CONTRIBUTION | DATE RECEIVED |
|----------------|---|--|---------------------------------------|------------------------------------|
| | | | | RECEIVED BY |
| PAC | 1. INDIANA REALTORS POLITICAL ACTION COMMITTEE 7301 N. SHARON ROAD A16 INDIANAPOLIS, IN 46250 | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify) | 1,500.00 | 10/3/16 TYLER MOORE |
| CORP | 2. BARNES & THORNBURG 11 S. MERIDIAN ST. INDIANAPOLIS, IN 46204 | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify) | 1,000.00 | 6-15-16 TYLER MOORE |
| CORP | 3. MOORE TITLE & ESCROW, INC. 1215 E. HOFFER ST. KOKOMO, IN 46902 | Contributions: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) PAYED THROUGH POSTAGE, YARD STICKS Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify) | 1,625.05 | VARIOUS DATES TYLER MOORE |

CERTIFICATION

FOR OFFICE USE ONLY

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 **CANDIDATE** Date (MM-DD-YY) **10-14-16**

Signature of Candidate (if applicable) Date (MM-DD-YY) **10-14-16**

Warning: Any information contained in this report may not 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 3-14-1-13) 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)