



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

State Form 4606 (R14 / 10-17)  
Indiana Election Division (IC 3-9-5-14)

OF (CFA-4)  
**Summary Sheet**

|   |
|---|
| <b>FILE NUMBER</b>                        |
|   |
| <b>TOTAL PAGES IN ENTIRE CFA-4 REPORT</b> |
|   |

*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) <input type="checkbox"/> Check if this is a new name.<br><b>Committee to Elect Troy Beachy</b>            |   |
| 2. Acronym or Abbreviated Name (if any)   | 3. Committee Telephone Number<br><b>(765) 210-1555</b>    |
| 4. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address.<br><b>4870 N. 600 E.</b> |   |
| 5. City, State, ZIP Code<br><b>10000, IN 46701</b>  | 6. Party Affiliation (if applicable)<br><b>Republican</b> |

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

|   |   |
|---|---|
| 7. Full Name of Candidate (Include any nickname.)<br><b>Troy A. Beachy</b>  | 8. Party Affiliation or If Independent Candidate<br><b>Republican</b> |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.)<br><b>Liberty Township Trustee, Howard County</b> | 10. County of Residence<br><b>Howard</b>                              |

**TYPE OF REPORT** **CONVENTION CANDIDATES ONLY**

|   |   |
|---|---|
| 11. Check one:<br><input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other<br><input checked="" type="checkbox"/> Final / Disbands Committee (Lines 18, 19, and 20 must be "0") <input type="checkbox"/> Outgoing Treasurer (Within ten (10) days amend Statement of Organization.) | Check one:<br><input type="checkbox"/> Pre-Convention<br><input type="checkbox"/> Post-Convention |
|---|---|

|   |                                 |                                  |
|---|---------------------------------|----------------------------------|
| 12. Reporting Period (mm/dd/yy):<br>From <b>01/01/17</b> Through: <b>12/31/17</b> | <b>COLUMN A<br/>This Period</b> | <b>COLUMN B<br/>Year to Date</b> |
| 13. Cash on hand and investments at the beginning of this reporting period.       | 0                               | 0                                |
| 14. Cash on hand and investments January 1, current year.                         | 0                               | 0                                |

**CONTRIBUTIONS AND RECEIPTS**

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

|   |   |   |
|---|---|---|
| 15a. Itemized (Use Schedule A.)   | 0 | 0 |
| 15b. Unitemized   | 0 | 0 |
| 15c. Add lines 15a and 15b in both columns. <b>SUBTOTAL</b>                         | 0 | 0 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. <b>TOTAL</b> | 0 | 0 |

**EXPENDITURES**

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

|   |   |   |
|---|---|---|
| 17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)  | 0 | 0 |
| 17b. Unitemized   | 0 | 0 |
| 17c. Add lines 17a and 17b in both columns. <b>SUBTOTAL</b>   | 0 | 0 |
| 18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) <b>TOTAL</b> | 0 | 0 |
| 19. Debts OWED BY the committee (Use Schedule D.)   | 0 | 0 |
| 20. Debts OWED TO the committee (Use Schedule E.)   | 0 | 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<br>                 | Title<br><b>Trustee</b> | Date (mm/dd/yy)<br><b>01/11/18</b> |
| Signature of Candidate (if applicable)<br> |                         | Date (mm/dd/yy)<br><b>01/11/18</b> |

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 Level 6 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**  
**JAN 16 2018**  
**KIM WILSON**  
Clerk Howard Cir. Court