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

(CFA-4) **Summary Sheet** 

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.

FILE NUMBER 6967 TOTAL PAGES IN ENTIRE CFA-4 REPORT

reverse side.			9	
IS THIS AN AMENDMENT? Yes X No	-			
COMMITTEE INFORMATION				
1. Full name of committee (as on Statement of Organization)  Check if this is a new name Bartholomew County Democratic Party				
2. Acronym or abbreviated name, if any	3. Committee tele	phone no	umber	
BCDP	(812) 418-8	3594		
4. Mailing address (address where all campaign finance correspondence is received	eck if this is a new add	Iress		
1417 CHESTNUT ST				
5. City, state, ZIP code	6. Party affiliation	(if applic	cable)	
COLUMBUS IN 47201	Democration	;		
CANDIDATE INFORMATION (For Candidate's				
7. Full name of candidate (include any nickname)	8. Party affiliation		ependent	
Office as white / in all the district to use here if any Net to a single for a superior of the same in	Democration			
Office sought (include district number, if any. Not required for exploratory committee.	10. County of res	idence		
TYPE OF REPORT			CONVENTION CANDID	DATES ONLY
11.			12. Check one:	
			Pre-Conv	ention
Annual			Post-Con	vention
12. Reporting period:			COLUMN A	COLUMN B
From: 10/14/2023 Through: 12/31/2023			This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			15,207.33	
14. Cash on hand and investments January 1, current year.				14,340.31
CONTRIBUTIONS AND RECEIPTS				
(Note: These amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (use Schedule A)			3,943.33	28,021.67
15b. Unitemized			0.00	2,939.65
15c. Add lines 15a, and 15b in both columns		TOTAL	3,943.33	30,961.32
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B		TOTAL	19,150.66	45,301.63
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.) 17a. Itemized (use Schedule B) (Public Question: use Schedule C)			6,074.01	32,224.98
17b. Unitemized		ŀ	42.70	42.70
17c. Add lines 17a and 17b in both columns	SUB <sup>-</sup>	TOTAL	6,116.71	32,267.68
18. Cash on hand and investments at close of this reporting period(subtract 17c from 16 in both columns		TOTAL	13,033.95	13,033.95
19. Debts OWED BY the committee (use Schedule D)			0.00	
20. Debts OWED TO the committee (use Schedule E)		ŀ	0.00	
CERTIFICATION		•		

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BESTRUE, CORRECT AND COMPLETE.	ST OF MY KNOWLEDGE AND BELIEF	TIT IS
Signature of Treasurer	Title	Date
Signature Included	Treasurer	02/04/2024
Signature of Candidate (if applicable)		Date
Signature Included		02/04/2024
WARNING: Any information contained in this report may not be copied	for sale or used for any commercial pu	ırpose.
(IC 3-9-4-5) A person who knowingly files a fraudulent report commits a	Level 6 Felony. (IC 3-14-1-13) A pers	son 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.)

FOR OFFICE USE ONLY

Filed: Online 2/4/24 7:32 pm



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

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 ITEM15a 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

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the c	calendar year. Otherwise, this is optional.	· .			
	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	Paul Davis 3355 Carolina Street Columbus IN 47203	Contribution: Direct	50.00	500.00	10/30/2023
					Dennis Baute
Contri	butor's Occupation (if required): Retired -				
2	Jean Marr Wilkins 4845 North Marr road Columbus IN 47203	Contribution: Direct	125.00	165.00	11/08/2023
					Dennis Baute
Contri	butor's Occupation (if required): Retired -				
3	Paul W Hoffman 1307 Rocky Ford Road Columbus, Indiana in 47203	Contribution: Direct  Gifting of campaign fund monies remaining	182.05	207.05	11/20/2023
		Tomaning			Dennis Baute
Contri	butor's Occupation (if required): -				
4	Dennis Baute 3010 Wedgewood Drive Columbus IN 47203	Contribution: Direct	1,100.00	3,400.00	11/20/2023
					Dennis Baute
Contri	butor's Occupation (if required): Retired -				
5	Paul Davis 3355 Carolina Street Columbus IN 47203	Contribution: Direct	50.00	550.00	12/05/2023
					Dennis Baute
Contri	butor's Occupation (if required): Retired -				
	SUB TO	OTAL THIS PAGE OF SCHEDULE A	\$ 1,507.05		
		OULE A ON THE LAST PAGE ONLY	\$		
			1		



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

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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.

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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
Jean Marr Wilkins     4845 North Marr road     Columbus IN 47203  Contributor's Occupation (if required): Retired -	Contribution: Direct	60.00	225.00	12/19/2023  Dennis Baute
Ross Thomas     2246 Franklin St     Columbus IN 47201  Contributor's Occupation (if required): Attorney/Legal -	Contribution: In-Kind  Misc. In-kind donations - Donuts, drinks, postcards for mailers, door hangers, toner cartridges, etc.	1,074.91	1,074.91	12/30/2023  Dennis Baute
TOTAL OF ALL PAGES OF	SUB TOTAL THIS PAGE OF SCHEDULE A SCHEDULE A ON THE LAST PAGE ONLY on ITEM 15a of the Summary Sheet)	\$ 1,134.91 \$ 2,641.96		



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

# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

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 ITEM15a 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 the 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).

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Withii	n a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).  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	ActBlue P.0. Box 441146 Somerville IN 02144	Contribution: Direct	144.06	7,263.63	10/30/2023
					Dennis Baute
2	ActBlue P.0. Box 441146 Somerville IN 02144	Contribution: Direct	625.28	7,888.91	10/30/2023
					Dennis Baute
3	ActBlue P.0. Box 441146 Somerville IN 02144	Contribution: Direct	100.83	7,989.74	11/08/2023
					Dennis Baute
4	ActBlue P.0. Box 441146 Somerville IN 02144	Contribution: Direct	38.41	8,028.15	11/08/2023
					Dennis Baute
5	ActBlue P.0. Box 441146 Somerville IN 02144	Contribution: Direct	93.16	8,121.31	11/20/2023
					Dennis Baute
	SUB TOT	AL THIS PAGE OF SCHEDULE A	\$ 1,001.74		
	TOTAL OF ALL PAGES OF SCHEDU ( Enter total on ITEM	LE A ON THE LAST PAGE ONLY 15a of the Summary Sheet )	\$		



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

### (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

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 ITEM15g 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 the 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,

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withi	n a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).	TYPE OF CONTRIBUTION	COLUMNIA	COLUMNIA	DATE DECEMED
	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
	(street, number, city, state ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1	ActBlue P.0. Box 441146	Contribution: Direct	72.02	8,193.33	12/05/2023
	Somerville IN 02144				
					Dennis Baute
2	ActBlue P.0. Box 441146 Somerville IN 02144	Contribution: Direct	52.82	8,246.15	12/05/2023
					Dennis Baute
3	ActBlue P.0. Box 441146 Somerville IN 02144	Contribution: Direct	48.02	8,294.17	12/19/2023
					Dennis Baute
4	ActBlue P.0. Box 441146 Somerville IN 02144	Contribution: Direct	126.77	8,420.94	12/19/2023
					Dennis Baute
	SUB TOTA	AL THIS PAGE OF SCHEDULE A	\$ 299.63		
	TOTAL OF ALL PAGES OF SCHEDUI ( Enter total on ITEM	LE A ON THE LAST PAGE ONLY 15a of the Summary Sheet)	\$ 1,301.37		



(CFA-4 SCHEDULE B) Itemized Expenditures

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 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.

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RECIPIENT'S NAME AND MAILING	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF
ADDRESS (street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	YEAR-TO-DATE	EXPENDITURE
Code: Operations		Direct	152.36	1,490.64	10/27/2023
1 Comcast Cable 1470 jackson St Columbus IN 47201		Purpose: Cable Bill			
Code: Operations		Direct	35.00	381.48	10/28/2023
2 Sharon Krieg 2903 Indiana COLUMBUS IN 47203		Purpose: Reimbursement for Constant Contact Bill			
Code: Operations		Direct	51.15	570.98	11/03/2023
3 Duke Energy Utility Company					
IN		Purpose: Electric bill			
Code: Advertising		Direct	728.82	1,110.30	11/08/2023
4 Sharon Krieg 2903 Indiana COLUMBUS IN 47203		Purpose: Reimbursement for postal expenses - pre-election mailing.			
Code: Operations		Direct	31.81	938.74	11/08/2023
5 CenterPoint Energy					
IN		Purpose: Gas Bill			
Code: Advertising		Direct	328.34	670.81	11/09/2023
6 Steve Schoettmer 10880 E 700 S Elizabethtown IN 47232		Purpose: Reimbursement for testing expenses (Scale to Win)			
Code: Operations		Direct	750.00	750.00	11/10/2023
7 Hotel Indigo 400 Brown Street Columbus IN 47201		Purpose: Party share of rent for election night event at Indigo Inn			
	SUB TOTAL T	HIS PAGE OF SCHEDULE B	\$ 2,077.48		
	TOTAL OF ALL PAGES OF SCHEDULE I	B ON THE LAST PAGE ONLY	\$		



(CFA-4 SCHEDULE B) Itemized Expenditures

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RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF
ADDRESS (street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	EXPENDITUR
Code: Operations		Direct	35.00	1,145.30	11/19/2023
1 Sharon Krieg 2903 Indiana COLUMBUS IN 47203		Purpose: Reimbursement for Constant Contact			
Code: Operations		Direct	128.98	861.60	11/20/2023
2 Madalaine/Carolyn Halloran/Cory 19945 E 410 E Hope IN 47246		Purpose: Reimbursement for candy used at Festival of Lights Parade			
Code: Operations		Direct	152.39	1,643.03	11/27/2023
3 Comcast Cable 1470 jackson St Columbus IN 47201		Purpose: Cable Bill			
Code: Operations		Direct	41.75	612.73	12/05/2023
4 Duke Energy Utility Company					
IN		Purpose: Electric bill			
Code: Missing 5 Michelle Carr		Direct	240.58	897.48	12/03/2023
3229 Rolling Hill Drive Columbus IN 47201		Purpose: Reimbursement for Festival of Lights Parade decorations.			
Code: Operations		Direct	86.36	699.09	12/07/2023
6 CenterPoint Energy					
IN		Purpose: Electric bill			
Code: Operations		Direct	83.90	754.71	12/19/2023
7 Steve Schoettmer 10880 E 700 S Elizabethtown IN 47232		Purpose: Reimbursement			
		for Canvasing snacks			
	SUB TOTAL T	HIS PAGE OF SCHEDULE B	\$ 768.96		
1	OTAL OF ALL PAGES OF SCHEDULE I		\$		
	(Enter total on ITEN	1 17a of the Summary Sheet)	T		



(CFA-4 SCHEDULE B) Itemized Expenditures

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

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MUST be itemized on this schedule.					
RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	
Code: Operations		Direct	119.56	1,017.04	12/21/2023
1 Michelle Carr					
3229 Rolling Hill Drive		B B. int			
Columbus IN 47201		Purpose: Reimbursement for Festival of Lights			
		Supplies			
Code: Operations		Direct	152.39	1,795.42	12/27/2023
2 Comcast Cable					
1470 jackson St					
Columbus IN 47201		Purpose: Cable Bill			
Code: Operations		Direct	590.00	6,414.00	10/29/2023
3 David Marvin				5,	
2945 Flintwood Drive					
Columbus IN 47203		Purpose: Rent			
Code: Missing		Direct	588.00	7,002.00	11/30/2023
4 David Marvin					
2945 Flintwood Drive		D D I			
Columbus IN 47203		Purpose: Rent			
Code: Missing		Direct	582.00	7,584.00	12/31/2023
5 David Marvin					
2945 Flintwood Drive					
Columbus IN 47203		Purpose: Rent			
Code: Operations		Direct	35.00	1,180.30	11/27/2023
6 Sharon Krieg				,	
2903 Indiana					
COLUMBUS IN 47203		Purpose: Reimbursement			
		for Constant Contact			
Code: Operations		Direct	85.71	784.80	12/29/2023
7 CenterPoint Energy					
IN		Purpose: Gas Bill			
	SUB TOTAL T	HIS PAGE OF SCHEDULE B	\$ 2,152.66		
1	OTAL OF ALL PAGES OF SCHEDULE I	ON THE LAST PAGE ONLY 17a of the Summary Sheet)	\$		
	(Enter total on HEN	i ira oi tile Julillary Sileet)			



(CFA-4 SCHEDULE B) Itemized Expenditures

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

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MUST be itemized on this schedule.

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION  OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code: Operations  1 Ross Thomas 2246 Franklin St Columbus IN 47201		In-Kind  Purpose: Data entry to equal out Ross Thomas In-kind donations of	1,074.91	1,894.02	12/30/2023
SUB TOTAL THIS PAGE OF SCHEDULE B  TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY  (Enter total on ITEM 17a of the Summary Sheet)		\$ 1,074.91 \$ 6,074.01			