



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

State Form 4806 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

Summary Sheet

FILE NUMBER

07-027

TOTAL PAGES IN ENTIRE CFA-4 REPORT:

4

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
Mitch Harper Leadership Committee

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number
(260) 436-4824

4. Mailing Address (address where all campaign finance correspondence is received) Check if this is a new address
5207 Hopkinton Drive

5. City, State, ZIP Code
Fort Wayne, Indiana 46814

6. Party Affiliation (if applicable)
Republican

CANDIDATE INFORMATION (For Candidate's Committee Only)

7. Full Name of Candidate (include any nickname)
Mitch V. Harper

8. Party Affiliation or if independent Candidate
Republican

9. Office Sought (include district number, if any. Not required for exploratory committee.)
Fourth District - Fort Wayne Council

10. County of Residence
Allen

TYPE OF REPORT

CONVENTION CANDIDATE (if applicable)

11. Check one:
 Pre-Primary Pre-Election Annual Nomination Other

Final/Diabanda 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:
From: 01/01/2010 Through: 12/31/2010

	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	579.53	
14. Cash on hand and investments January 1, current year.		264.53

CONTRIBUTIONS AND RECEIPTS

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

	COLUMN A This Period	COLUMN B Year to Date
15a. Itemized (use Schedule A)	820.90	920.90
15b. Unitemized	—	—
15c. Add lines 15a and 15b in both columns	SUBTOTAL 820.90	920.90
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL 1400.43	1085.43

EXPENDITURES

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

17a. Itemized (use Schedule B) (Public Question: use Schedule C)	1085.90	1085.90
17b. Unitemized	—	—
17c. Add lines 17a and 17b in both columns	SUBTOTAL 1085.90	1085.90
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	
19. Debts OWED BY the committee (use Schedule D)	26,076.90	
20. Debts OWED TO the committee (use Schedule E)		

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 <i>Mitch Harper</i>	Title Chairman/Treasurer	Date 01/18/2011
Signature of Candidate (if applicable) <i>Mitch Harper</i>		Date 01/18/2011

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)



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State Form 4808 (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.

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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 \$	COLUMN B TOTAL \$	DATE RECEIVED RECEIVED BY
1. Mitch V. Harper 5207 Hopkinton Dr Fort Wayne IN 46814 Contributor's Occupation (if required) <u>Atty./candidate</u>	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	820.90	820.90	10/14/2012 Mitch Harper
2. _____ Contributor's Occupation (if required) _____ 3. _____ Contributor's Occupation (if required) _____ 4. _____ Contributor's Occupation (if required) _____ 5. _____ Contributor's Occupation (if required) _____				
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 820.90		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY <i>(Enter total on ITEM 15a of the Summary Sheet)</i>		\$ 820.90		



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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.

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RECIPIENT'S NAME AND MAILING ADDRESS <small>(Street, number, city, state, ZIP code)</small>	REPORT'S DESCRIPTION <small>OFFICE, SCHOOL, PARTY, etc.</small>	TYPE OF EXPENDITURE <small>Direct, In-Kind, Payment of Debt, Returned Contribution, Other</small>	AMOUNT PAID	AMOUNT PAID	DATE PAID
Code <u>0</u> Allen Co. Right to Life 3409 Cornerstone Fort Wayne IN	Non-profit	<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: ticket	40.00	40.00	10/11/2010
Code <u>A</u> 4 imprint 101 Commerce Oshkosh	specialty adv.	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input checked="" type="checkbox"/> Other see item Purpose: specialty advertising	820.90	820.90	10/14/2010
Code <u>A</u> Mike Lukich 7105 Jackson Hammond IN 46324	Graphic design	<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: Ad design	50.00	50.00	12/31/2010
Code <u>A</u> Mike Lukich 7105 Jackson Hammond IN 46324		<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: graphic design	25.00	75.00	12/31/2010
Code <u>A</u> Mitch Harper 5207 Hopkinson Fort Wayne IN 46814	atty/cand. adv	<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: Reimburse NAACP Ad	150.00	150.00	12/31/2010
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 B			\$ 1085.90		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY <small>(Enter total on ITEM 17a of the Summary Sheet)</small>			\$ 1085.90		



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**(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.

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CREATOR'S OR LENDER'S NAME & MAILING ADDRESS <small>(Street number, city, state, ZIP code)</small>	EXCESSIVE OR LENDING NAME & MAILING ADDRESS <small>(Street number, city, state, ZIP code)</small>	AMOUNT owed	DATE owed	TERMINATION DATE	DATE AND PERIOD
Mitch Harper 5207 Hupkinton East Wayne IN 46814 LENDER'S OCCUPATION: Atty: cand. date		10,000. ⁰⁰			
		Loan	4/06/07	-	10,000. ⁰⁰
LENDER'S OCCUPATION:		500. ⁰⁰			
		Loan	11/5/07	-	500. ⁰⁰
LENDER'S OCCUPATION:		13,000. ⁰⁰			
		Loan	12/3/07	-	13,000. ⁰⁰
LENDER'S OCCUPATION:		1,750. ⁰⁰			
		Loan	7/24/09	-	25,250. ⁰⁰
LENDER'S OCCUPATION:		820. ⁵⁰			
		Loan	10/14/10	-	26,076. ⁵⁰
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
SUBTOTAL THIS PAGE OF SCHEDULE D					\$26,076.⁹⁰
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY <small>(Enter total on ITEM 19 of the Summary Sheet)</small>					\$26,076.⁹⁰