

REPORT OF RECEIPTS AND EXPENDITURES
 OF POLITICAL COMMITTEE
 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 |
| | TOTAL PAGES IN ENTIRE REPORT |
| IS THIS AN AMENDMENT? YES NO | 3 |

| | |
|---|--|
| 1. Full name of committee (as on Statement of Organization) Check if this is a new name Sue Orth For Treasurer | |
| 2. Acronym or abbreviated name, if any N/A | 3. Committee telephone number 260-627-0103 |
| 4. Mailing address (address where all campaign finance correspondence is received) Check if this is a new address 9530 Poplar Creek Place | |
| 5. City, State , ZIP code Leo IN 46765 | 6. Party affiliation (if applicable) Republican |
| 7. Full name of candidate (include any nickname) Susan (Sue) L Orth | 8. Party affiliation or if independent Republican |
| 9. Office sought (include district number, if any. Not required for exploratory committee.) Treasurer of Allen County | 10. County of residence Allen |

| | | |
|---|--|-----------|
| 11. Check one: Pre-Primary Pre-Election <input checked="" type="checkbox"/> Annual Nominaton Other Final / Disband Committee (line 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: January 1, 2010 Through December 31, 2010 | | |
| 13. Cash on hand and investments at the beginning of this reporting period. | \$ 173.35 | |
| 14. Cash on hand and investments January 1, 2010 | | \$ 173.35 |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) | | |
| 15a. Itemized (use Schedule A) | \$ 0.38 | \$ 0.38 |
| 15b. Unitemized | \$ 0.00 | \$ - |
| 15c. Add lines 15a, and 15b in both columns | SUBTOTAL \$ 0.38 | \$ 0.38 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B | TOTAL \$ 173.73 | \$ 173.73 |
| (Note: These amounts include in-kind expenditures and loan repayments.) | | |
| 17a. Itemized (use Schedule B) (Public Question: use Schedule C) | \$ - | \$ - |
| 17b. Unitemized | \$ - | \$ - |
| 17c. Add lines 17a and 17b in both columns | SUBTOTAL \$ - | \$ - |
| 18. Cash on hand and investments at close of this reporting period (sub 17c from 16 in both col) | TOTAL \$ 173.73 | \$ 173.73 |
| 19. Debts OWED BY the committee (use Schedule D) | \$ 3,000.00 | |
| 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>Joseph E. Orth</i> | Title Treasurer | Date 1-3-11 |
| Signature of Candidate (if applicable) <i>Susan L Orth</i> | | Date 1-3-2011 |

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 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).

2011 JAN 10 AM 9:27

INDIANA ELECTION BOARD

REPORT OF RECEIPTS AND EXPENDITURES
 OF 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

FILE NUMBER

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

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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 contributors occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

| NAME AND ADDRESS OF CONTRIBUTOR | TYPE OF CONTRIBUTION OR RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED RECEIVED BY |
|---|---|--------------------------------|-------------------------------------|------------------------------|
| Fire Police City County FCU 3306 N Clinton Street Fort Wayne IN 46805 | Contributions: <input checked="" type="checkbox"/> Direct In-Kind (describe) Other Receipts: Interest Loan Misc (specify) | \$0.38 | \$0.38 | 12/31/2010 Sue Orth |
| | Contributions: <input type="checkbox"/> Direct In-Kind (describe) Other Receipts: Interest Loan Misc (specify) | | | |
| | Contributions: Direct In-Kind (describe) Other Receipts: <input checked="" type="checkbox"/> Interest Misc (specify) | | | |
| | Contributions: Direct In-Kind (describe) Other Receipts: Interest x Loan Misc (specify) | | | |
| | Contributions: Direct In-Kind (describe) Other Receipts: <input checked="" type="checkbox"/> Interest Misc (specify) | | | |
| SUB TOTAL THIS PAGE OF SCHEDULE A | | \$0.38 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (enter total on ITEM 15a of the Summary Sheet) | | \$0.38 | | |

FILE NUMBER

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. List all debts and loans, regardless of the amount, OWED BY 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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| NAME OF LENDER (Last, first, middle initial, address, city, state, zip) | | AMOUNT | DATE DEBT INCURRED | CUMULATIVE PAID YEAR TO DATE | OUTSTANDING BALANCE THIS PERIOD |
|--|--|--------------------|--------------------|------------------------------|---------------------------------|
| | | NATURE OF DEBT | | | |
| Susan Orth 9530 Poplar Creek Pl Leo IN 46765 Lenders Occupation: Allen County Treasurer | | \$3,000.00 Loan | 12/16/2008 | \$ - | \$3,000.00 |
| Lenders Occupation: | | | | | |
| Lenders Occupation: | | | | | |
| Lenders Occupation: | | | | | |
| Lenders Occupation: | | | | | |

SUB TOTAL THIS PAGE OF SCHEDULE D **\$3,000.00**

TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY

(Enter total on ITEM 19 of the Summary Sheet) **\$3,000.00**