



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-6-14)

**(CFA-4)
Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT
3

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
Milne for School Board Committee

2. Acronym or Abbreviated Name (if any)
N/A

3. Committee Telephone Number
(260)616-0616

4. Mailing Address (address where all campaign finance correspondence is received) Check if this is a new address
11210 CrossTree Ct.

5. City, State, ZIP Code
Ft. Wayne, IN 46814

6. Party Affiliation (if applicable)
N/A

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)
Meagan Kathleen Milne

8. Party Affiliation or if Independent Candidate
N/A

9. Office Sought (Include district number, if any. Not required for exploratory committee.)
At Large Southwest Allen County School Board

10. County of Residence
Allen

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: 10-14-12 Through: 12-24-12 | | |
| 13. Cash on hand and investments at the beginning of this reporting period. | \$0 | |
| 14. Cash on hand and investments January 1, current year. | | \$0 |

CONTRIBUTIONS AND RECEIPTS

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

| | | |
|--|------------|------------|
| 15a. Itemized (use Schedule A) | \$3,113.00 | \$3,713.00 |
| 15b. Unitemized | \$0 | \$150 |
| 15c. Add lines 15a and 15b in both columns SUBTOTAL | \$3,113.00 | \$3,863.00 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL | \$3,113.00 | \$3,863.00 |

EXPENDITURES

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

| | | |
|--|------------|------------|
| 17a. Itemized (use Schedule B) (Public Question; use Schedule C) | \$2,987.54 | \$3,698.04 |
| 17b. Unitemized | \$73.00 | \$164.96 |
| 17c. Add lines 17a and 17b in both columns SUBTOTAL | \$3,060.54 | \$3,863.00 |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL | \$52.46 | \$0 |
| 19. Debts OWED BY the committee (use Schedule D) | \$0 | |
| 20. Debts OWED TO the committee (use Schedule E) | \$0 | |

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 Treasurer | Date December 25, 2012 |
| Signature of Candidate (if applicable) | | Date December 25, 2012 |



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**(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 listed 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 |
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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 THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE RECEIVED RECEIVED BY |
|--|---|-----------------------------------|--|---|
| 1. Meagan K. Milne 11210 Crosstree Ct. Fl. Wayne, IN Contributor's Occupation (if required) Candidate for Office | 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) | \$2,213.00 | \$2,213.00 | November 7, 2012 Committee/Meagan Milne |
| 2. Beth Stewart 7493 Edgewater Dr. 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) | \$100.00 | \$100.00 | October 12, 2012 Meagan Milne |
| 3. Karen Kirby 11421 Chestnut Ridge Dr. Fl. Wayne IN 46814 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) | \$800.00 | \$800.00 | October 27, 2012 Meagan Milne |
| 4. 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) | | | |
| 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 | | \$3,113.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY <i>(Enter data on ITEM 15a of the Summary Sheet)</i> | | \$3,113.00 | | |



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Slate Form 4606 (R13/11-05)
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**(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

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| 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>A</u> JustYardSigns.com 4880 A # 6 Distribution Court Orlando, FL 32822 | Sign Maker | X Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | \$163.00 | \$873.50 | 10-25-12 |
| Code <u>A</u> Karen Kirby 11421 Chestnut Ridge Dr. Fort Wayne, IN 46814 | N/A - Hosted Candidate Meeting Party | X Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: | \$299.14 | \$299.14 | 10-21-12 |
| Code <u>A</u> Copy Solutions, Inc. 6928 W. Jefferson Blvd. FL Wayne, IN 46804 | Printer/Bulk Mailer | <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: | \$975.98 | \$975.98 | 10-29-12 |
| Code <u>A</u> Copy Solutions 5928 W. Jefferson Blvd. Ft. Wayne, IN 46804 | Printer/Bulk Mailer | <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: | \$1,549.42 | \$2,525.40 | 10-30-12 |
| 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 B \$1,438.12