



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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

## (CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

**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  
**RENEWING EDUCATIONAL PROPERTIES WITH APPROPRIATE INVESTMENT + REPAIR**

2. Acronym or Abbreviated Name (if any) **REPAIR FWCS**

3. Committee Telephone Number **(260) 710-0915**

4. Mailing Address (address where all campaign finance correspondence is received)  Check if this is a new address  
**2827 BUCKHURST RUN**

5. City, State, ZIP Code **FORT WAYNE, IN 46815**

6. Party Affiliation (if applicable)

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

7. Full Name of Candidate (include any nickname)

8. Party Affiliation or If Independent Candidate

9. Office Sought (Include district number, if any. Not required for exploratory committee.)

10. County of Residence

### 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:  
From: **04-14-12** Through: **12-31-12**

COLUMN A  
This Period

COLUMN B  
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

**23,004.88**

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)	<b>36,446.61</b>	<b>69,547.84</b>
15b. Unitemized	<b>680.00</b>	<b>5,148.00</b>
15c. Add lines 15a and 15b in both columns	<b>37,126.61</b>	<b>74,695.84</b>
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	<b>60,131.49</b>	<b>74,695.84</b>

### EXPENDITURES

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

17a. Itemized (use Schedule B) (Public Question: use Schedule C)	<b>37,594.63</b>	<b>52,158.98</b>
17b. Unitemized		
17c. Add lines 17a and 17b in both columns	<b>37,594.63</b>	<b>52,158.98</b>
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	<b>22,536.86</b>	<b>22,536.86</b>
19. Debts OWED BY the committee (use Schedule D)	<b>NONE</b>	
20. Debts OWED TO the committee (use Schedule E)	<b>NONE</b>	

### 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 **[Signature]** Title **TREASURER** Date **1-4-13**

Signature of Candidate (if applicable) \_\_\_\_\_ Date \_\_\_\_\_

FOR OFFICE USE ONLY

92:11 MW 6-NVC 0102

03NOV2012 11:01:13

**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)



REPORT OF RECEIPTS AND EXPENDITURES OF A 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

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.

FILE NUMBER
Page \_\_\_\_\_ of \_\_\_\_\_

Table with 5 columns: CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS, TYPE OF CONTRIBUTION OR OTHER RECEIPT, COLUMN A AMOUNT THIS PERIOD, COLUMN B CUMULATIVE YEAR-TO-DATE, DATE RECEIVED RECEIVED BY. Rows include: 1. WILLIAM CATTELL, 2. JORDAN LEBAMOFF, 3. STEVE CORONA, 4. KELLY WOLFORD, 5. CAROL COEN. Includes subtotal and total of all pages.



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OF A POLITICAL COMMITTEE**

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

**(CFA-4 SCHEDULE A-2)  
CONTRIBUTIONS BY CORPORATIONS  
Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS 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 corporations 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).

FILE NUMBER \_\_\_\_\_

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CONTRIBUTOR'S FULL NAME AND 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. FORT WAYNE METALS RESEARCH PRODUCT CORP. 9609 ARDMORE AVE FW, IN 46809	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)	1,500.00	1,500.00	4-24-12  D DOUGLAS WORTHINGTON
2. BFA MAGNET WIRE COMPANY, INC. 3600 E. PONTIAC ST FW, IN 46896	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)	5,000.00	5,000.00	5-3-12  D W
3. ALLEN COUNTY BUILDERS SUPPLY, INC. 6527 US HIGHWAY 30 EAST FW, IN 46803	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)	200.00	200.00	5-3-12  D W
4. PROFESSIONAL FEDERAL CREDIT UNION 1710 ST JOE BLVD. FW, IN 46895	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)	500.00	500.00	7-6-12  D W
5. OCE NORTH AMERICA DOCUMENT PRINTING SYSTEMS 6915 INNOVATION BLVD. FW, IN 46815	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) COLOR COPIES + PAPER SUPPLIES  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	3,249.50  10,449.50	3,249.50	4-23-12 4-25-12 5-3-12  D W
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		\$ 9,000		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet)</i>		\$		



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Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-3)  
CONTRIBUTIONS BY  
LABOR ORGANIZATIONS**

**Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS 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 labor organizations **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).

**FILE NUMBER**

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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. LOCAL #166 PLUMBERS & STEAMFITTERS 8930 W. LODWIG RD FW, IN 46815	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) _____	5,000.00	5,000.00	4-26-12  B DOUGLAS WORTHINGTON
2.	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) _____			
3.	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) _____			
4.	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.	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) _____			
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		\$ 5,000.00		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> (Enter total on ITEM 15a of the Summary Sheet)		\$		



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

**(CFA-4 SCHEDULE A-5)  
CONTRIBUTIONS BY  
OTHER ORGANIZATIONS**

**Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND 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 other entities **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 amount** from candidate's, legislative caucus, and regular party 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).**

**FILE NUMBER**

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CONTRIBUTOR'S FULL NAME AND 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. FULLER ENGINEERING CO 4135 W. 99th ST. CARMEL, IN 46032 LLC	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)	5,000.00	5,000.00	4-20-12  D DOUGLAS WORTHINGTON
2. VALIDATED CUSTOM SOLUTIONS, LLC 6128 COLLEGE AVE INDIANAPOLIS, IN 46220	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)	10,000.00	10,000.00	4-23-12  D W
3.	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)			
4.	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.	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)			
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		<b>\$ 15,000.00</b>		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet)</i>		<b>\$ 36,446.61</b>		



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**(CFA-4 SCHEDULE C)  
ITEMIZED EXPENDITURES  
For Public Questions**

**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. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, **MUST** be itemized on this schedule.

**FILE NUMBER**

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**PUBLIC QUESTION INFORMATION**

Enter Text of Public Question

SHALL FWCS BE ABLE TO BORROW MONEY TO REPAIR BUILDINGS ?

Type of Question:  Statewide  Local

Position:  Supported  Opposed

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code <u>A</u> BALLPARK COMMUNICATIONS, INC. 3765 E 65th ST. INDIANAPOLIS, IN 46220	PRINTER	<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:	26,400.00	29,450.00	4-25-12 5-1-12 5-3-12
Code <u>A</u> ASHER AGENCY INC. 535 W. WAYNE FW, IN 46802	ADVERTISING AGENCY	<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:	5,475.00	10,475.00	5-15-12
Code <u>A</u> SEELY OFFICE SOLUTIONS 5618 INDUSTRIAL RD. FW, IN 46825	PRINTER	<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:	1,923.65	2,873.36	4-27-12 5-7-12 5-8-12
Code <u>0</u> MAMMOTH COURTSIDE ENTERPRISES 803 S. CALHOUN ST. FW, IN 46802	LANDLORD	<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:	96.80	1467.80	4-24-12
Code <u>—</u> JOHN RILEY 11709 SCHWARTZ RD FW, IN 46835	—	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input checked="" type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	150.00	150.00	5-7-12
Code <u>—</u> MORRISON, KATHANN MORSE, INC. 119 W. WAYNE ST FW, IN 46802	—	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input checked="" type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	100.00	100.00	5-7-12

SUBTOTAL THIS PAGE OF SCHEDULE C

\$ 34,145.45

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

\$

(Enter total on ITEM 17a of the Summary Sheet)



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

**(CFA-4 SCHEDULE C)  
ITEMIZED EXPENDITURES  
For Public Questions**

**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. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, **MUST** be itemized on this schedule.

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**PUBLIC QUESTION INFORMATION**

Enter Text of Public Question

SHALL FWCS BE ABLE TO BORROW MONEY TO REPAIR BUILDINGS?

Type of Question:  Statewide  Local  
Position:  Supported  Opposed

RECIPIENT'S NAME AND MAILING ADDRESS <i>(street number, city, state, ZIP code)</i>	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE <i>and</i> PURPOSE <i>(be specific)</i>	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code <u>D</u> PAYPAL FEES	FEES	<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:	152.57	218.81	VARIOUS
Code <u>O</u> CAROL COBU 221 NW PASSAGE TR FW, IN 46825		<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	47.11	47.11	5-15-12
Code <u>A</u> OCE NORTH AMERICA DOCUMENT PRINTING SYSTEMS 6915 INNOVATION DR FW, IN 46815	PRINTER	<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	3249.50	3249.50	4-23-12 4-25-12 5-3-12
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:			
<b>SUBTOTAL THIS PAGE OF SCHEDULE C</b>			\$ <del>000</del>		
<b>TOTAL OF ALL PAGES OF SCHEDULE C ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 17a of the Summary Sheet)</i>			\$ <del>3,449.18</del>		

3,7594.63