



**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

TOTAL PAGES IN ENTIRE CFA-4 REPORT

1

**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 <i>Statement of Organization</i> ) <input type="checkbox"/> Check if this is a new name <b>Somers for NACS School Board</b>	
2. Acronym or Abbreviated Name ( <i>if any</i> )	3. Committee Telephone Number ( 260 ) 637-0163
4. Mailing Address ( <i>address where all campaign finance correspondence is received</i> ) <input type="checkbox"/> Check if this is a new address <b>12018 Thornapple Cv</b>	
5. City, State, ZIP Code <b>Fort Wayne, IN 46845</b>	6. Party Affiliation ( <i>if applicable</i> ) <b>n/a</b>

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

7. Full Name of Candidate ( <i>include any nickname</i> ) <b>Kent Howard Somers</b>	8. Party Affiliation or If Independent Candidate <b>Independent</b>
9. Office Sought ( <i>Include district number, if any. Not required for exploratory committee.</i> ) <b>NACS School Board, District 1</b>	10. County of Residence <b>Allen</b>

**TYPE OF REPORT**

**CONVENTION CANDIDATES ONLY**

11. Check one: <input type="checkbox"/> Pre-Primary <input checked="" type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other _____ <input type="checkbox"/> Final/Disbands Committee ( <i>lines 18, 19, and 20 must be "0"</i> ) <input type="checkbox"/> Outgoing Treasurer ( <i>within 10 days amend Statement of Organization</i> )	Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention
--	---

12. Reporting Period: From: <b>4-9-2016</b> Through: <b>10-14-2016</b>	<b>COLUMN A This Period</b>	<b>COLUMN B Year to Date</b>
13. Cash on hand and investments at the beginning of this reporting period.	<b>200</b>	
14. Cash on hand and investments January 1, current year.		<b>200</b>

**CONTRIBUTIONS AND RECEIPTS**

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

15a. Itemized (use Schedule A)	<b>0</b>	<b>0</b>
15b. Unitemized	<b>0</b>	<b>0</b>
15c. Add lines 15a and 15b in both columns <b>SUBTOTAL</b>	<b>0</b>	<b>0</b>
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B <b>TOTAL</b>	<b>200</b>	<b>200</b>

**EXPENDITURES**

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

17a. Itemized (use Schedule B) (Public Question: use Schedule C)	<b>0</b>	<b>0</b>
17b. Unitemized	<b>0</b>	<b>0</b>
17c. Add lines 17a and 17b in both columns <b>SUBTOTAL</b>	<b>0</b>	<b>0</b>
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) <b>TOTAL</b>	<b>200</b>	<b>200</b>
19. Debts OWED BY the committee (use Schedule D)	<b>0</b>	
20. Debts OWED TO the committee (use Schedule E)	<b>0</b>	

**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 <b>Treasurer</b>	Date <b>10/18/2016</b>
Signature of Candidate ( <i>if applicable</i> ) 		Date <b>10/18/2016</b>

**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)