

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

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

(CFA-4) **Summary Sheet** 

FILE NUMBER

2017-38

**TOTAL PAGES IN ENTIRE CFA-4 REPORT** 

10

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)	name		
Eric S. Powell for Coroner			
2. Acronym or Abbreviated Name (if any)	3. Comm	nittee Telephone Number	
	812	<sub>)</sub> 272-3859	
4. Mailing Address (address where all campaign finance correspondence is received)	Check if this	is a new address	
1815 E. Thornton Dr.			
5. City, State, ZIP Code		Affiliation (if applicable)	
Bloomington, IN 47401	Repub		
CANDIDATE INFORMATION (For Candidate's		···	
7. Full Name of Candidate (include any nickname)	1	Affiliation or If Independent	Candidate
Eric Scott Powell	Repub		
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	l	ity of Residence	
Coroner	Monro		
TYPE OF REPORT			CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conve	
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Utgoing Treasurer (within 10 days amend Statement	of Organization)	☐ Post-Conve	ention
12. Reporting Period:  From: 01/01/2016 Through: 12/31/2016		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		0.00	
14. Cash on hand and investments January 1, current year.			0.00
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (use Schedule A)		515.00	815.00
15b. Unitemized		545.00	
	TOTAL	515.00	815.00
	TOTAL	515.00	815.00
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		845.50	845.50
17b. Unitemized			
and the Association of the Control o	BTOTAL	845.50	845.50
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	0.00	0.00
19. Debts OWED BY the committee (use Schedule D)		0.00	
20. Debts OWED TO the committee (use Schedule E)			

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 Title Treasurer	Date 01/17/2017
Signature of Candidate (if applicable)	Date 01/17/2017
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purp	ose. (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) CLERK MONROE CIRCUIT COURT

JAN 18 2017

10:35 AM



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	2	of	10	

Tim and MaryBeth Deckard 724 Christopher Dr. Bloomington, IN    Contributions:	CONTRIBUTOR'S FULL NAME AND OCCUPATION 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
Contributor's Occupation (f required)   Contributor's Occupation (f focular to f f f f f f f f f f f f f f f f f f	1. Tim and MaryBeth Deckard 724 Christopher Dr.	Direct			
Contributor's Occupation (/ required)   Cont		☐ Interest ☐ Loan	\$200.00	\$200.00	Eric S. Powell
Direct   In-Kind (describe)   \$100.00   \$100.00		Contributions			
Interest   Loan   Misc. (specify)   Eric Powell	Michael A. Cherkala 2553 S. Smith Road	Direct			04/20/2016
Contributions:   Direct   Loan   Misc. (specify)	Bloomington, IN 47401	Interest Loan	\$100.00	\$100.00	Eric Powell
Phillip Chamberlin    Direct					
Contributor's Occupation (if required)  4.   Contributions:   Direct   Int-Kind (describe)		Direct			10/11/2016
4. Contributions:   Direct   In-Kind (describe)		☐ Interest ☐ Loan	\$15.00	\$15.00	Eric S. Powell
Direct   In-Kind (describe)					-
Contributor's Occupation (if required)  5.  Contributions: Direct In-Kind (describe)  Other Receipts: Interest Loan Misc. (specify)  Contributor's Occupation (if required)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 315.00	4.	Direct			
Contributions: Direct In-Kind (describe)  Other Receipts: Interest Loan Misc. (specify)  Contributor's Occupation (if required)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 315.00  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY		☐ Interest ☐ Loan			
Contributor's Occupation (if required)  SUBTOTAL THIS PAGE OF SCHEDULE A  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	Contributor's Occupation (if required)	<u> </u>			
Contributor's Occupation (if required)  SUBTOTAL THIS PAGE OF SCHEDULE A \$ 315.00  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	5.	Direct			
SUBTOTAL THIS PAGE OF SCHEDULE A \$ 315.00  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY		Interest Loan			
SUBTOTAL THIS PAGE OF SCHEDULE A \$ 315.00  TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY	Contributor's Occupation (if required)				
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY		THIS PAGE OF SCHEDULE A	\$ 315.00		
[Enter total on them tod of the Continual & Cheen	TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY			



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				
Page	3_	of	10	

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
Toussaint & Coaty P.C. 32065 Castle CT STE 150 Evergreen, CO 80439	Contributions:    Direct	\$500.00	\$500.00	09/20/2016 Eric S. Powell
2.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe) Other Receipts:			
CHRIOTAL	Interest Loan Misc. (specify)  THIS PAGE OF SCHEDULE A	\$ 500.00		
TOTAL OF ALL PAGES OF SCHEDULE		\$ 500.00		



# (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				
Page _	4	of	10	

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED RECEIVED BY
1.	(Street, number, city, state, 211 coccy	Contributions:  Direct In-Kind (describe)	PERIOD	YEAR-TO-DATE	RECEIVED BY
		Other Receipts: Interest Loan Misc. (specify)			
2.		Contributions: Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
3.		Contributions:  Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
4.		Contributions: Direct In-Kind (describe)		; ;	
		Other Receipts: Interest Loan Misc. (specify)			
5.		Contributions:  Direct In-Kind (describe) Other Receipts:			
		Interest Loan Misc. (specify)			
	SUBTOTAL TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY	\$ 0.00		
	(Enter total on ITE	M 15a of the Summary Sheet)	\$		



# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES 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 political action committees 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 political action 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					
Page _	5	of .	10	-	

CONTRIBUTOR'S FULL FULL MAILING ADD (street, number, city, stat	RESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	e, zir cudej	Contributions:  Direct In-Kind (describe)	PENIOD	TEAR-TO-DATE	RECEIVED B1
		Other Receipts:  Interest Loan  Misc. (specify)			
2.		Contributions:  Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
3.		Contributions:  Direct In-Kind (describe)			
		Other Receipts.  Interest Loan  Misc. (specify)			
4.		Contributions:  Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
5.		Contributions: Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
TOTAL OF ALL F	AGES OF SCHEDULE A	HIS PAGE OF SCHEDULE A ON THE LAST PAGE ONLY 15a of the Summary Sheet)	\$ 0.00 \$		



#### (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				
Page	6	of	10	

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
	Contributions.			
2.	Contributions: Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
3.	Contributions:			
	☐ Direct☐ In-Kind (describe)	ļ		
	Other Receipts:			•
	Misc. (specify)			
				_
4.	Contributions:			
	☐ In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Misc. (specify)	Ī		
5.	Contributions:			-
	☐ Direct☐ In-Kind (describe)			,
		į		
	Other Receipts:			
	Misc. (specify)			
	HIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY 15a of the Summary Sheet)	\$		



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.

FILE NUMBER				
Page _	7	of	10	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION  OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
My Sports Locker 1917 S. Walnut St. Bloomington, IN 47401	Custom Apparel Store	PURPOSE (be specific)  Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$150.00	\$150.00	11/15/2016
Code A  ABR Print 3808 W. Vernal Pike Bloomington, IN 47404	Printing Company	☐ Direct ☐ In-Kind  ☑ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$695.50	\$695.50	9/16/16
Code <u>F</u>		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
TOTAL OF ALL PA	\$ 845.50 \$				



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.

FILE NUMBER				
Page	. 8	of		
	10			

				Page8	of
	PUBLIC QUESTIO	N INFORMATION			<del></del>
Enter Text of Public Question					
Type of Question: Statewide Position: Supported Oppose					
RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A AMOUNT THIS	COLUMN B	DATE OF
(street, number, city, state, ZIP code)		and PURPOSE (be specific)	PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
		Returned Contribution			
		Other Purpose:			
Code		Direct In-Kind	-		
		☐ Payment of Debt☐ Returned Contribution			
		Other			
		Purpose:			:
Code		☐ Direct ☐ In-Kind			
		☐ Payment of Debt☐ Returned Contribution			
		Other			!
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
		Returned Contribution			
		Other Purpose:	i		
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
		Returned Contribution			
		Other Purpose:			
		☐ Direct ☐ In-Kind			
Code		Payment of Debt			
		Returned Contribution Other			
		Purpose:			
	SUBTOTAL THIS PAG	SE OF SCHEDULE C	\$ 0.00		
	S OF SCHEDULE C ON THE	LAST PAGE ONLY	\$		
	(Enter total on ITEM 17a of t	ne Summary Sheet)			



## (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.

FILE NUMBER					
Page	9	of	10		

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD		
My Sports Locker 1917 S. Walnut St. Bloomington, IN 47401	My Sports Locker 1917 S. Walnut St. Bloomington, IN 47401	\$150.00	11/15/2016	\$150.00	\$0.00		
		Tshirts, Campanign Shirts	11710/2010	Ψ100.00	Ψ0.00		
LENDER'S OCCUPATION: ABR Print 3808 W. Vernal Pike Bloomington, IN 47404	ABR Print 3808 W. Vernal Pike Bloomington, IN 47404	\$695.50	9/16/2016	\$695.50	\$0.00		
LENDERS OCCUPATION	Breening Cont. III To 7	Camapign Signs	0,10,2010	ψοσσ.σσ	Ψ0.00		
			_				
ENDER'S OCCUPATION:	-						
LENDER'S OCCUPATION							
ENDER'S OCCUPATION.							
				,			
ENDER'S OCCUPATION.							
LENDER'S OCCUPATION:							
		SUBTOTA	L THIS PAGE O	F SCHEDULE D	\$ 0.00		
	TOTAL OF ALL	PAGES OF SCHEDUL. (Enter total on l		ST PAGE ONLY Summary Sheet)	\$		



# (CFA-4 SCHEDULE E) DEBTS OWED TO 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 TO the committee during the reporting period. Include all amounts the committee has loaned to others.

	FILE I	NUMBE	3	
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Page	10	of	10	

BORROWER'S NAME & MAILING ADDRESS	CO-SIGNER'S NAME & MAILING ADDRESS (if any)	ORIGINAL AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID	BALA	TANDING NCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	MOURRED	YEAR-TO-DATE	Pf	ERIOD
<u> </u>					1.	
					-	-
			·			
<u></u>		<u> </u>				
					\$	0.00
	TOTAL OF A	LL PAGES OF SCHEDUL			\$	
(Enter total on ITEM 20 of the Summary Sheet)						