



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4606 (R17 / 8-23)
Indiana Election Division (IC 3-9-5-14)

**(CFA-4)
Summary Sheet**

FILE NUMBER
2024-01
TOTAL PAGES IN ENTIRE CFA-4 REPORT
5

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>) Caldie for Council		<input type="checkbox"/> Check if this is a new name.	
2. Acronym or Abbreviated Name (if any)		3. Committee Telephone Number (812) 552-6099	
4. Mailing Address (Address where all campaign finance correspondence is received.) 170 E Sunny Slopes Dr.		<input type="checkbox"/> Check if this is a new address.	
5. City, State, ZIP Code Bloomington, IN 47401		6. Party Affiliation (if applicable) Democrat	
CANDIDATE INFORMATION (For Candidate's Committees Only)			
7. Full Name of Candidate (Include any nickname.) Matthew Caldie		8. Party Affiliation or If Independent Candidate	
9. Office Sought (Include district number, if any. Not required for exploratory committee.) Monroe County Council At-Large		10. County of Residence Monroe	
TYPE OF REPORT		CONVENTION CANDIDATES ONLY	
11. Check one: <input checked="" type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other _____ <input type="checkbox"/> Final / Disbands Committee (Lines 18, 19, and 20 must be "0") <input type="checkbox"/> Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)		Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention	
12. Reporting Period (mm/dd/yy): From: 01/01/2024 Through: 04/12/2024		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.)		3,700.00	3,700.00
15b. Unitemized		100.00	100.00
15c. Add lines 15a and 15b in both columns. SUBTOTAL		3,800.00	3,800.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. TOTAL		3,800.00	3,800.00
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		2,542.00	2,542.00
17b. Unitemized		108.80	108.80
17c. Add lines 17a and 17b in both columns. SUBTOTAL		2,650.80	2,650.80
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) TOTAL		1,149.92	1,149.92
19. Debts OWED BY the committee (Use Schedule D.)			
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>[Signature]</i>	Title Treasurer	Date (mm/dd/yy) 04/18/24	FILED APR 19 2024 MONROE CIRCUIT COURT
Signature of Candidate (if applicable) <i>[Signature]</i>		Date (mm/dd/yy) 04/18/24	
<p>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 Level 6 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)</p>			

APR 19 AM 9:00



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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 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.

Page _____ of _____

<p>1. Nikki Farrell 802 E Eddington Court Bloomington, IN 47401</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	\$200.00	\$200.00	01/27/24 NF
<p>2. David Gamage 5603 Autumn Ridge Ct. Columbia, MO 65203</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	\$100.00	\$100.00	02/04/24 ActBlue/NF
<p>3. Shruti Rana 3516 S Ashwood Dr. Bloomington, IN 47401</p> <p>Contributor's Occupation (if required) <u>Professor</u></p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	\$1,300.00	\$1,300.00	02/13/24 03/02/24 ActBlue/NF
<p>4. Sarah Bauerle 3307 S Daniel Ct. Bloomington, IN 47401</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	\$100.00	\$100.00	02/13/24 NF
<p>5. Cathleen Caldwell 6580 S 650 W Columbus, IN 47201</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	\$400.00	\$400.00	02/11/24 03/07/24 MC/NF
SUBTOTAL THIS PAGE OF SCHEDULE A		\$2100.00		



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**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

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Page _____ of _____

<p>1. Sue Wanzer 690 West Fairway Drive Bloomington, IN 47403</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	<p>\$200.00</p>	<p>\$200.00</p>	<p>02/27/24 03/24/24</p> <p>Actblue/NF</p>
<p>2. Jodie Friend 5200 S. Leonard Springs Road Bloomington, IN 47403</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	<p>\$550.00</p>	<p>\$550.00</p>	<p>02/03/24 02/28/24</p> <p>WIX/NF ActBlue/NF</p>
<p>3. Russell Gamage 3516 S Ashwood Dr. Bloomington, IN 47401</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	<p>\$100.00</p>	<p>\$100.00</p>	<p>03/08/24</p> <p>MC</p>
<p>4. Jason Bertocci 843 E Eminence Way Bloomington, IN 47401</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	<p>\$100.00</p>	<p>\$100.00</p>	<p>03/04/24</p> <p>ActBlue/NF</p>
<p>5. Shelle Yoder 3516 E Bradley St. Bloomington, IN</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	<p>\$100.00</p>	<p>\$100.00</p>	<p>03/29/24</p> <p>ActBlue/NF</p>

SUBTOTAL THIS PAGE OF SCHEDULE A	\$800.00
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>	\$



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**(CFA-4 SCHEDULE A-1)
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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.

Page _____ of _____

<p>1. John Hamilton 635 S Woodlawn St Bloomington, IN 47401</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	\$200.00	\$200.00	04/08/24
				ActBlue/NF
<p>2. Nancy Goswami P.O Box 8425 Bloomington, IN 47407</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	\$250.00	\$250.00	04/04/24
				Check/MC
<p>3. Jake George 502 E Graham Place Bloomington, IN 47401</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>	\$100.00	\$100.00	02/02/24
				WIX/NF
<p>4.</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p> <p>Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)</p>			
<p>5.</p> <p>Contributor's Occupation (if required)</p>	<p>Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)</p>			



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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.

Page _____ of _____

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> O </u> Indiana Democratic Party 101 W. Washington St., Ste 1110 East Indianapolis, IN 46204	Political Party	<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: Voter List Application	\$250.00	\$250.00	02/17/24
Code <u> A </u> EZ Mailing LLC 1801 W 18 th St. Indianapolis, IN 46202	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: Yard Signs	\$856.00	\$856.00	02/17/24
Code <u> A </u> Patrick Siney 1303 S Stull Ave. Bloomington, IN 47401	Printer/Graphic Design	<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: Door Hanger	\$286.00	\$286.00	03/14/24
Code <u> A </u> EZ Mailing LLC 1801 W 18 th St. Indianapolis, IN 46202	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:	\$1,050	\$1,050	3/14/24
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			\$1,392.00		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY <i>(Enter total on ITEM 17a of the Summary Sheet.)</i>			\$1,392.00		