

**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

45 10929

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
CTE KIM EDWARDS

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number
(219) 781-7906

4. Mailing Address (address where all campaign finance correspondence is received) Check if this is a new address
1701 SENATOR DR

5. City, State, ZIP Code
EAST CHICAGO IN 46312

6. Party Affiliation (if applicable)
DEMOCRAT

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)
KIM EDWARDS

8. Party Affiliation or if Independent Candidate
DEMOCRAT

9. Office Sought (Include district number, if any. Not required for exploratory committees.)
EAST CHICAGO COMMON COUNCIL DIST 4

10. County of Residence
LAKE

TYPE OF REPORT

11. Check one:
 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)

CONVENTION CANDIDATES ONLY
Check one:
 Pre-Convention
 Post-Convention

12. Reporting Period:	COLUMN A This Period	COLUMN B Year to Date
From: 1/1/11 Through: 12/31/11		
13. Cash on hand and investments at the beginning of this reporting period.	394.75	
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)	0.00	1317.60
15b. Unitemized	0.00	0.00
15c. Add lines 15a and 15b in both columns		
SUBTOTAL	0.00	1317.60
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B		
TOTAL	394.75	1317.60

EXPENDITURES

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

17a. Itemized (use Schedule B) (Public Question: use Schedule C)	378.00	1300.85
17b. Unitemized	16.75	16.75
17c. Add lines 17a and 17b in both columns		
SUBTOTAL	394.75	1317.60
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 M. Davis	Title Treasurer	Date 1/23/12
Signature of Candidate (if applicable) K Edwards		Date 1/23/12

FOR OFFICE USE ONLY

RECEIVED

JAN 27 2012

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)

LAKE COUNTY ELECTION REGISTRATION BOARD

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**(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 1 of 1

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS <i>(if any)</i> <i>(street, number, city, state, ZIP code)</i>	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
KIM EDWARDS 1701 SENATOR DR EAST CHICAGO, IN 46312 ENDER'S OCCUPATION:		\$800.00	3-2-11	Walking List \$42.00 3-13-11	\$758.00
		LOAN			
ENDER'S OCCUPATION:			3-2-11	142.00 3-18-11	\$6.58
		LOAN			
ENDER'S OCCUPATION:		\$247.60	4-1-11		\$905.60
		LOAN			
ENDER'S OCCUPATION:			5-30-11		(\$905.60)
		FORGIVE LOAN			
ENDER'S OCCUPATION:					
ENDER'S OCCUPATION:					
ENDER'S OCCUPATION:					
SUBTOTAL THIS PAGE OF SCHEDULE D					\$0.00
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY <i>(Enter total on ITEM 19 of the Summary Sheet)</i>					\$0.00