



**SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT
BY A CANDIDATE'S COMMITTEE
(\$1,000 CONTRIBUTIONS OR MORE)**

(CFA-11)

State Form 48492 (RS-10-17)
Indiana Election Division (IC 3-9-5-20.1, 3-9-5-22)

INSTRUCTIONS: Only candidates receiving a "large contribution" are required to file this report. 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.

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-11 REPORT

COMMITTEE INFORMATION

1. Full Name of Candidate (Include any nickname.) Check if this is a new name
Sullivan for Indiana

2. Committee Telephone Number
(317) 917-0791

3. Mailing Address (Address where all campaign finance correspondence is received.) Check if this is a new address.
315 W. Walnut Street

4. City **Indianapolis** State **IN** ZIP Code **46202**

5. Party Affiliation or If Independent Candidate

6. Office Sought (Include district number, if any. Not required for exploratory committee.)
Indianapolis School Board (At-Large)

7. County of Residence
Marion

8. Reporting Period (mm/dd/yy):
 From **10/21/2018** Through **10/23/2018**

For classification, enter INDV for individual; PAC for political action committee; CORP for corporation; LAB for labor organization; OTHER for all entries which are not one of the above categories.

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED (mm/dd/yy) RECEIVED BY
Classification PAC 1. Inly Chamber BAC 111 Monument Cir, STE 1950 Indianapolis, IN 46204 Contributor's Occupation (if applicable)	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) <u>Consulting</u> Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$ 4,000.00	10/21/18 MAE
Classification 2. Contributor's Occupation (if applicable)	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)		
Classification 3. Contributor's Occupation (if applicable)	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)		

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 (mm/dd/yy) **10/23/2018**

Signature of Candidate (if applicable) **[Signature]** Date (mm/dd/yy) **10/23/2018**

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, and IC 3-9-4-18)

FOR OFFICE USE **[Signature]**

OCT 23 2018
FILED