



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

State Form 48492 (R6 / 5-19)

Indiana Election Division (IC 3-9-5-20.1, 3-9-5-22)

(CFA-11)

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.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

FILE NUMBER

2023-35

TOTAL PAGES IN ENTIRE CFA-11
REPORT

1

COMMITTEE INFORMATION

1. Full Name of Candidate (Include any nickname.) ☐ Check if this is a new name. KERRY THOMSON		2. Committee Telephone Number ()	
3. Mailing Address (Address where all campaign finance correspondence is received.) ☒ Check if this is a new address. 532 S. COLLEGE AVE			
4. City BLOOMINGTON	State IN	ZIP Code 47403	5. Party Affiliation or if Independent Candidate DEMOCRAT
6. Office Sought (Include district number, if any. Not required for exploratory committee.) MAYOR			7. County of Residence MONROE
8. Reporting Period (mm/dd/yy): From 4/9/23 Through 4/30/23			

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 1. DPBE POLITICAL ACTION COMMITTEE 9025 RIVER RD, STE 200 INDIANA POLIS, IN 46240 Contributor's Occupation (if applicable)	Contributions: ☒ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	\$1000.00/xx	4/27/23 SARAH BOOTHER
Classification 2. Contributor's Occupation (if applicable)	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)		
Classification 3. Contributor's Occupation (if applicable)	Contributions: ☐ Direct ☐ In-Kind (describe) Other Receipts: ☐ Interest ☐ Loan ☐ 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 	Title TREASURER	Date (mm/dd/yy) 4/21/23
Signature of Candidate (if applicable) 		Date (mm/dd/yy) 4/27/23

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 ONLY

FILED

APR 30 2023

CLERK MONROE CIRCUIT COURT

12:00:12 AM
by email (Sunday)