



# 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

2023-27

TOTAL PAGES IN ENTIRE CFA-4 REPORT

4

**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) **Committee to elect Shruti Rana** ☐ Check if this is a new name.  
2. Acronym or Abbreviated Name (if any)  
3. Committee Telephone Number  
**(812) 822-1543**  
4. Mailing Address (Address where all campaign finance correspondence is received.) **3307 S Daniel Ct.** ☐ 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.) **Shruti Rana**  
8. Party Affiliation or If Independent Candidate  
**Democrat**  
9. Office Sought (Include district number, if any. Not required for exploratory committee.)  
**Bloomington City Council, District 5**  
10. County of Residence  
**Monroe**

## TYPE OF REPORT

## CONVENTION CANDIDATES ONLY

11. Check one:

☐ Pre-Primary ☐ Pre-Election ☐ Annual ☐ Nomination ☐ Other  
☐ Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) ☐ Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)

Check one:

☐ Pre-Convention  
☐ Post-Convention

12. Reporting Period (mm/dd/yy):

From: **04/08/2023** Through: **10/13/2023**

COLUMN A  
This Period

COLUMN B  
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

**6570.84**

14. Cash on hand and investments January 1, current year.

**0**

## CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (Use Schedule A.)

**800**

**10584.35**

15b. Unitemized

**745**

**4629.59**

15c. Add lines 15a and 15b in both columns.

**SUBTOTAL**

**1545**

**15213.94**

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.

**TOTAL**

**8115.84**

**15213.94**

## EXPENDITURES

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

17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)

**5214.13**

**12013.68**

17b. Unitemized

**23.25**

**298.55**

17c. Add lines 17a and 17b in both columns.

**SUBTOTAL**

**5237.38**

**12335.48**

18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)

**TOTAL**

**2878.46**

**2878.46**

19. Debts OWED BY the committee (Use Schedule D.)

**0**

20. Debts OWED TO the committee (Use Schedule E.)

**0**

## 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

Date (mm/dd/yy)

**Sarah Bauerle**

**Treasurer**

**10.19.23**

Signature of Candidate (if applicable)

Date (mm/dd/yy)

**Shruti Rana**

**10/16/23**

**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, IC 3-9-4-18)

FOR OFFICE USE ONLY

**FILED**

**OCT 20 2023**

By email 5:45A.M.  
CLERK MONROE CIRCUIT COURT





**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 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**

**2023-27**

Page 1 of 1

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 (mm/dd/yy)
				RECEIVED BY
1. Emily Bryant 3339 W 42nd St Indianapolis, IN 46226  Contributor's Occupation (if required) _____	Contributions: x <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) _____	25	215	7/15/2023  Sarah Bauerle
2. Varun Nikore 1100 N Quantico St Arlington, VA 22205  Contributor's Occupation (if required) _____	Contributions: x <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) _____	200	300	4/28/2023  Sarah Bauerle
3. Gary Taylor 937 S. Fieldcrest Ct. Bloomington, IN 47401  Contributor's Occupation (if required) _____	Contributions: x <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) _____	125	125	4/9/2023  Sarah Bauerle
4.  Contributor's Occupation (if required) _____	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) _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$350		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet.)		\$350		



**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 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**

**2023-27**

Page 1 of 1

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO- DATE	DATE RECEIVED <i>(mm/dd/yy)</i>	
				RECEIVED BY	
1.  Monroe County Black Democratic Caucus PO Box 3506 Bloomington, IN 47402	Contributions: X <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	250	250	05/22/2023	
				Sarah Bauerle	
2.  Stonewall Democrats of South Central Indiana PO Box 92 Bloomington, IN 47402	Contributions: X <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____	200	200	5/22/2023	
				Sarah Bauerle	
5.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <i>(describe)</i> _____  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous <i>(specify)</i> _____				
SUBTOTAL THIS PAGE OF SCHEDULE A		\$450			
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		\$450			





# 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 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

2023-27

Page 1 of 1

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
	OFFICE SOUGHT (if applicable)				
<div>Code <u>  </u> O <u>  </u></div> <div>Act Blue</div> <div>366 Summer St</div> <div>Somerville, MA 02144</div>	Financial Services	<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:	16.47	395.82	ongoing
<div>Code <u>  </u> O <u>  </u></div> <div>Stripe</div> <div>354 Oyster Pt. Blvd</div> <div>San Francisco CA</div>	Financial Services	<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:	28.23	226.64	ongoing
<div>Code <u>  </u> A <u>  </u></div> <div>Sticker Mule, LLC</div> <div>336 Forest Ave</div> <div>Amsterdam, NY 12010</div>	Printing Services	<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:	605.29	605.29	5/15/23
<div>Code <u>  </u> O <u>  </u></div> <div>Janae Cummings</div> <div>1585 S Renwick Blvd</div> <div>Bloomington, IN 47401</div>	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:	1000	2000	4/26/23
<div>Code <u>  </u> A <u>  </u></div> <div>KJB Enterprises LLC</div> <div>1801 W 18<sup>th</sup> St</div> <div>Indianapolis, IN 46202</div>	Signs and mailers	<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:	3064.14	5801.2	4/27/23; 4/23/23; 4/21/23
<div>Code <u>  </u> C <u>  </u></div> <div>City of Bloomington; Black History Month Gala</div> <div>401 North Morton St</div> <div>Bloomington, IN 47404</div>	City government, Black History Month Gala organizers	<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:	500	500	4/8/23
<b>SUBTOTAL THIS PAGE OF SCHEDULE B</b>			\$5214.13		
<b>TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY</b> (Enter total on ITEM 17a of the Summary Sheet.)			\$5214.13		