

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

State Form 48492 (R7 / 8-23) Indiana Election Division (IC 3-9-5-20.1; 3-9-5-22)

completing this form, see instructions on the reverse side.

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

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-11 REPORT

IS THIS AN AMENDMENT? Yes		MITTEE INFORMAT	ION	STATE OF THE PARTY	-
Full Name of Candidate (Include any nickname.)	Check if this is a ne	w name. 2. Committe	e Telephone N	umber	
Committee to Elect Brad Bra	y Commiss	sioner (765	437-4847		
 Mailing Address (Address where all campaign fina 610 Holiday Dr. 	nce correspondence	is received.) Check	if this is a new	address.	
2007:00 C	State ZIP C		5. Party Affill Repub	liation or If Independent Candidate Nican	
s. Office Sought (Include district number, if any. Not Howard County Commission		7. County of Residence Howard			
8. Reporting Period (mm/dd/yy): From: 4/13/24	Through: 5/5/24				
For classification, enter INDV for individual; PAC for political act		corporation; LAB for labor org	anization; OTHER	for all entries which are not one of the	above categories.
CONTRIBUTOR'S FULL NAME AND OC FULL MAILING ADDRESS (street, number, city, state, ZIP of		TYPE OF CONT OR OTHER R		COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED ACCEPTED (mm/dd/yy) RECEIVED BY
Brad Battin15366 Whistling Ln.Carmel, IN 46033		Contributions: Direct In-Kind (describe	,	2,500.00	
		Other Receipts: Interest Loar Miscellaneous (s			4/25/24
Contributor's Occupation (if applicable) Partner-Construction	on Co.	Contributions:		The state of the s	
Classification 2.		☐ Direct ☐ In-Kind (describe)		
		Other Receipts: Interest Loar Miscellaneous (s	2376		
Contributor's Occupation (If applicable)					
Classification 3.		Contributions: Direct In-Kind (describe)		
		Other Receipts:	Transport 9		
		☐ Miscellaneous (s	pecity)		
Contributor's Occupation (if applicable)	CERTIFICATION				FICE USE ONLY
CERTIFY THAT I HAVE EXAMINED THIS STA	TEMENT. TO THE	BEST OF MY KNOWL	EDGE AND B	ELIEF IT IS	

TRUE, CORRECT AND COMPLETE

Signature of Freasurer

Signature of Candidate (if applicable)

Title. reasurer Date (mm/dd/yy)

Date

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)

FILED

APR 2 5 2024

DEBBIE STEWART Clerk Howard Cir. Court