



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R18 / 6-25)  
Indiana Election Division (IC 3-9-5-14)

(CFA-4)  
Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

THREE

**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.  
**JOE FOR THE PEOPLE**

2. Acronym or Abbreviated Name (if any)  
**"J.F.P." OR "JFTP"**

3. Committee Telephone Number  
**(930) 904-0598**

4. Mailing Address (Address where all campaign finance correspondence is received.)  Check if this is a new address.  
**530 S. WASHINGTON ST.**

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.)  
**JOSEPH BRADLEY DAVIS**

8. Party Affiliation or If Independent Candidate  
**DEMOCRAT**

9. Office Sought (Include district number, if any. Not required for exploratory committee.)  
**COUNTY CLERK FOR THE CIRCUIT COURT**

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: **1-1-2026** Through: **4-10-2026**

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

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

### CONTRIBUTIONS AND RECEIPTS

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

15a. Itemized (Use Schedule A.) **\$0.00**

15b. Unitemized **\$0.00**

15c. Add lines 15a and 15b in both columns. **SUBTOTAL \$0.00**

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B. **TOTAL \$0.00**

### EXPENDITURES

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

17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.) **\$0.00**

17b. Unitemized **\$0.00**

17c. Add lines 17a and 17b in both columns. **SUBTOTAL \$0.00**

18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.) **TOTAL \$/00**

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

20. Debts OWED TO the committee (Use Schedule E.) **(42925)**

### CERTIFICATION

FOR OFFICE USE ONLY

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE

If a Treasurer of a PAC: I have not knowingly or willfully received, solicited, or accepted, either directly or indirectly, contributions or expenditures from a foreign national that exceeds \$50,000 within the four (4) years immediately preceding the date of the contribution.  (please check box)

Signature of Treasurer: **Joseph Bradley Davis** Title: **CANDIDATE / TREASURER** Date (mm/dd/yy): **4-17-26**

Signature of Candidate (if applicable): **Joseph Bradley Davis** Date (mm/dd/yy): **4-17-26**

**FILED**

APR 17 2026

APR 17 AM 11:34

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)

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State Form 4606 (R17/8-23)  
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**(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	
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CONTRIBUTOR'S FULL NAME AND OCCUPATION 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. JOSEPH B. DAVIS 530 S. WASHINGTON BLMTON, IN 47401 ST.	Contributions: <input checked="" 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> _____	100		1-10-26
Contributor's Occupation <i>(if required)</i> _____				
2.	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> _____			
Contributor's Occupation <i>(if required)</i> _____				
3.	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> _____			
Contributor's Occupation <i>(if required)</i> _____				
4.	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> _____			
Contributor's Occupation <i>(if required)</i> _____				
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> _____			
Contributor's Occupation <i>(if required)</i> _____				
<b>SUBTOTAL THIS PAGE OF SCHEDULE A</b>		\$		
<b>TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 15a of the Summary Sheet.)</i>		\$		



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**(CFA-4 SCHEDULE E)  
DEBTS OWED TO THIS COMMITTEE**

**FILE NUMBER**

**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 TO** the committee during the reporting period. Include all amounts the committee has loaned to others.

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BORROWER'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	CO-SIGNER'S NAME AND MAILING ADDRESS <i>(if any)</i> <i>(street, number, city, state, ZIP code)</i>	ORIGINAL AMOUNT	DATE DEBT INCURRED <i>(mm/dd/yy)</i>	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
JOSEPH B. DAVIS 530 S. WASH. BLMFM IN 47401		\$42925	8-24-24	0.00	\$42900
		PREVIOUS CAMPAIGN MATERIALS			
<b>SUBTOTAL THIS PAGE OF SCHEDULE E</b>					\$
<b>TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY</b> <i>(Enter total on ITEM 20 of the Summary Sheet.)</i>					\$42900