

**SUPPLEMENTAL "LARGE CONTRIBUTION"
REPORT BY A CANDIDATE'S COMMITTEE
(\$1,000 CONTRIBUTIONS OR MORE)
State Form 48492 (R3/11--05)
Indiana Election Commission (IC 3-9-5-20.1; 3-9-5-22)
Approved by State Board of Accounts 1997**

(CFA-11)

FILE NUMBER
TOTAL PAGES IN CFA-11
CFA-11 Page 1 of 2

INSTRUCTIONS: Only candidates receiving a 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 reverse side of Form

COMMITTEE INFORMATION	
1. Full name of candidate (include any nickname) <input type="checkbox"/> Check if new name Winnecke for Mayor	2. Committee telephone number 812-402-1049
3. Mailing Address (address where campaign finance correspondence is received) <input type="checkbox"/> Check if new address P O Box 15371	
4. City, state, ZIP code Evansville, IN 47716	5. Party affiliation or if independent Republican
6. Office sought (include district number if any. (Not required for exploratory cmte.) Mayor of Evansville IN	7. County of residence Vanderburgh
8. Reporting period: From: 10-24-11 Through: 10-26-11	

For classification, enter INDV for individual; PAC for political action committee; CORP for corporation; LAB for labor organization; NONE for all entries which are not one of the above categories.

CONTRIBUTOR'S NAME, OCCUPATION AND MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED RECEIVED BY
Classification 1. INDV Carolyn S. McClintock 1525 Victoria Green Blvd Evansville, IN 47715 Contributor's Occupation (if applicable) Realtor	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$1,000.00	10-25-11 Garv W Dicus CPA
Classification 2. INDV Robert M. Kent 8012 Wyngate Circle Newburgh, IN 47630 Contributor's Occupation (if applicable) Auto Executive	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$1,000.00	10-25-11 Garv W Dicus CPA
Classification 3. INDV Victor Schriefer 6219 E Walnut St. Evansville, IN 47715 Contributor's Occupation (if applicable) Retired	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$1,000.00	10-25-11 Garv W Dicus CPA

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 <i>[Signature]</i>	Title Treasurer	Date 10-27-11
Signature of Candidate (if applicable) <i>[Signature]</i>		Date 10-27-11
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 Class D 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, 3-9-4-17, 3-9-4-18).		

Encl 48492 5R49 10.27.11 10.03

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Classification 1. NONE VWE LLC 4611 Mortsen Rd Suite 111 Ames, IA 50014 Contributor's Occupation (if applicable)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$1,500.00	10-25-11 Garv W Dicus CPA
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"/> Misc (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"/> Misc (specify)		

CERTIFICATION

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

FOR OFFICE USE ONLY

Signature of Treasurer	Title	Date
Signature of Candidate (if applicable)		Date

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