

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2015 JUL 15 PM 12:02  
Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5

STAR Financial Bank PAC

ADDRESS (number and street) 127 West Berry Street

Check if different than previously reported. (ACC) Fort Wayne IN 46802

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**

C 00366633

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on MEM / DD / YYYYYY in the State of  

(d) 30-Day POST-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on MEM / DD / YYYYYY in the State of  

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Karen F. Gregerson

Signature of Treasurer *Karen F. Gregerson* Date 07 / 10 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name  
STAR Financial Bank PAC

Report Covering the Period: From: 

MM	DD	YYYY
01	01	2015

 To: 

MM	DD	YYYY
06	30	2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>YYYY</td></tr><tr><td>2015</td></tr></table>	YYYY	2015		11,168.02
YYYY				
2015				
(b) Cash on Hand at Beginning of Reporting Period.....	11,168.02			
(c) Total Receipts (from Line 19).....	4,027.50	4,027.50		
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	15,195.52	15,195.52		
7. Total Disbursements (from Line 31).....	8,605.00	8,605.00		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	6,590.52	6,590.52		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....				
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....				

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100



# DETAILED SUMMARY PAGE of Disbursements

## II. Disbursements

### COLUMN A Total This Period

### COLUMN B Calendar Year-to-Date

	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8,605.00	8,605.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8,605.00	8,605.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8,605.00	8,605.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4,027.50	4,027.50
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4,027.50	4,027.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

N1-000000 | UN | UN | NO | UN | UN

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1 OF 2

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**STAR Financial Bank PAC**

A. Full Name (Last, First, Middle Initial) <b>Marcuccilli, James C.</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2015</b>
Mailing Address <b>534 Chestnut Forest Cove</b>		Amount of Each Receipt this Period <b>260.00</b>
City <b>Fort Wayne, IN 46814</b>	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ <b>260.00</b>
Name of Employer <b>STAR Financial Bank</b>	Occupation <b>Banker</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) <b>Marcuccilli, Thomas M.</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2015</b>
Mailing Address <b>10618 Indian Ridge Drive</b>		Amount of Each Receipt this Period <b>260.00</b>
City <b>Fort Wayne, IN 46814</b>	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ <b>260.00</b>
Name of Employer <b>STAR Financial Group, Inc.</b>	Occupation <b>Banker</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) <b>Beck, Richard E.</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2015</b>
Mailing Address <b>P.O. Box 9675</b>		Amount of Each Receipt this Period <b>260.00</b>
City <b>Fort Wayne, IN 46899</b>	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ <b>260.00</b>
Name of Employer <b>STAR Financial Bank</b>	Occupation <b>Banker</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<b>780.00</b>
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2 OF 2
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STAR Financial Bank PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Wingrove, William R.**

Mailing Address  
**7111 Koldyke Drive**

City **Fishers, IN** State **IN** Zip Code **46038**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STAR Financial Bank** Occupation **Banker**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**260.00**

Date of Receipt  
**06 / 30 / 2015**

Amount of Each Receipt this Period  
**260.00**

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>260.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1,040.00</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**STAR Financial Bank PAC**

Full Name (Last, First, Middle Initial)

**A. American Bankers Association BankPAC**

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2015

Mailing Address  
**Dept 4047**

City **Washington, DC** State Zip Code **20042-4047**

Purpose of Disbursement  
**PAC to PAC Contribution**

011

Amount of Each Disbursement this Period

Candidate Name

1,000.00

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Indiana BANKPAC**

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2015

Mailing Address  
**6925 Parkdale Place**

City **Indianapolis, IN** State Zip Code **46254**

Purpose of Disbursement  
**PAC to PAC Contribution**

011

Amount of Each Disbursement this Period

Candidate Name

7,355.00

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Donnelly, Joe**

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2015

Mailing Address  
**One North Capitol Avenue, Suite 1075**

City **Indianapolis, IN** State Zip Code **46204**

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

250.00

Office Sought:  House  Senate  President  
**Senator**

Disbursement For:  Primary  General  Other (specify) ▼

State: **IN** District:

SUBTOTAL of Disbursements This Page (optional).....▶

8,605.00

TOTAL This Period (last page this line number only).....▶

8,605.00



