

**FEC
FORM 3X**

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

RECEIVED
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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)

CITY ▲ STATE ▲ ZIP CODE ▲

Fort Wayne IN 46802

2. FEC IDENTIFICATION NUMBER ▼ 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 / DDDD / YYYYYY in the State of

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

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

Election on MEM / DDDD / YYYYYY in the State of

5. Covering Period 07 / 01 / 2014 through 09 / 30 / 2014

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  Date 10 / 07 / 2014

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
STAR Financial Bank PAC

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | | 14,532.52 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 3,570.52 | |
| (c) Total Receipts (from Line 19)..... | 6,692.50 | 10,302.50 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 10,263.02 | 24,835.02 |
| 7. Total Disbursements (from Line 31)..... | 750.00 | 15,322.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 9,513.02 | 9,513.02 |
| 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 Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
STAR Financial Bank PAC

Report Covering the Period: From: **07 / 01 / 2014** To: **09 / 30 / 2014**

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 4,970.00 | 5,475.00 |
| (ii) Unitemized..... | 1,722.50 | 4,827.50 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 6,692.50 | 10,302.50 |
| (b) Political Party Committees..... | | |
| (c) Other Political Committees (such as PACs)..... | | |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶ | | |
| 12. Transfers From Affiliated/Other Party Committees..... | | |
| 13. All Loans Received..... | | |
| 14. Loan Repayments Received..... | | |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | | |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | | |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | | |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | | |
| (b) Levin Funds (from Schedule H5)..... | | |
| (c) Total Transfers (add 18(a) and 18(b)).. | | |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 6,692.50 | 10,302.50 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 6,692.50 | 10,302.50 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | 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 | 750.00 | 15,322.00 |
| 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)) | 750.00 | 15,322.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) | 750.00 | 15,322.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | 10,552.50 | 14,162.50 |
| 34. Total Contribution Refunds (from Line 28(d)) | | |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 10,552.50 | 14,162.50 |
| 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) | | |

**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 5
(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)
Marcuccilli, James C.

Mailing Address
534 Chestnut Forest Cove

City State Zip Code
Fort Wayne, IN 46814

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
STAR Financial Bank Banker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 420.00

Date of Receipt
09 / 30 / 2014

Amount of Each Receipt this Period
140.00

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

Mailing Address
7111 Koldyke Drive

City State Zip Code
Fishers, IN 46038

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
STAR Financial Bank Banker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 420.00

Date of Receipt
09 / 30 / 2014

Amount of Each Receipt this Period
140.00

C. Full Name (Last, First, Middle Initial)
Marcuccilli, Thomas M.

Mailing Address
10618 Indian Ridge Drive

City State Zip Code
Fort Wayne, IN 46814

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
STAR Financial Group, Inc. Banker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
09 / 30 / 2014

Amount of Each Receipt this Period
140.00

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

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

420.00

**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 5

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)
Stinson, Paula S.

Mailing Address
119EMS B20C

City **Pierceton, IN 46562** State Zip Code

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 ▼
315.00

Date of Receipt
09 / 30 / 2014

Amount of Each Receipt this Period
105.00

B. Full Name (Last, First, Middle Initial)
Konkle, John R.

Mailing Address
519 Ponds Pointe Drive

City **Carmel, IN 46032** State Zip Code

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 ▼
235.00

Date of Receipt
09 / 30 / 2014

Amount of Each Receipt this Period
95.00

C. Full Name (Last, First, Middle Initial)
Runyon, Terry D.

Mailing Address
2219 Tansel Grove Lane

City **Indianapolis, IN 46234** State Zip Code

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 ▼
210.00

Date of Receipt
09 / 30 / 2014

Amount of Each Receipt this Period
70.00

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

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

270.00

**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 3 OF 5

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)
Shideler, Teala B.

Mailing Address
9511 N. Walnut

City Muncie, IN 47303 State Zip Code

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 ▼

210.00

Date of Receipt

09 / 30 / 2014

Amount of Each Receipt this Period

70.00

B. Full Name (Last, First, Middle Initial)
Stier, Kyle D.

Mailing Address
115 Willow Run Drive

City Monroeville, IN 46773 State Zip Code

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 ▼

210.00

Date of Receipt

09 / 30 / 2014

Amount of Each Receipt this Period

70.00

C. Full Name (Last, First, Middle Initial)
Wright, Kevin A.

Mailing Address
12431 Springbrooke Run

City Carmel, IN 46033 State Zip Code

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 ▼

210.00

Date of Receipt

09 / 30 / 2014

Amount of Each Receipt this Period

70.00

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

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

210.00

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

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

FOR LINE NUMBER: PAGE 4 OF 5

(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 |

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NAME OF COMMITTEE (In Full)
STAR Financial Bank PAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Cornwell, David D. | | Date of Receipt 09 / 30 / 2014 |
| Mailing Address 2214 Braemar Drive | | Amount of Each Receipt this Period 70.00 |
| City Fort Wayne, IN 46814 | State Zip Code | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer STAR Financial Group, Inc. | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | |

| | | |
|---|--------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Brooks, John R. | | Date of Receipt 07 / 25 / 2014 |
| Mailing Address 14505 White Loon Pass | | Amount of Each Receipt this Period 1,000.00 |
| City Roanoke, IN 46783 | State Zip Code | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Brooks Construction Co., Inc. | Occupation Contractor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1,000.00 | |

| | | |
|---|--------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Proffitt Reese, Melissa | | Date of Receipt 07 / 25 / 2014 |
| Mailing Address 4419 Washington Blvd. | | Amount of Each Receipt this Period 1,000.00 |
| City Indianapolis, IN 46205 | State Zip Code | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Ice Miller, LLP | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1,000.00 | |

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

2,070.00

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 5 OF 5

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)
Walker, Steven F.

Mailing Address
9012 Nautical Watch Drive

City **Indianapolis, IN 46236** State Zip Code

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

Name of Employer
Walker Information Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
07 / **25** / **2014**

Amount of Each Receipt this Period
1,000.00

B. Full Name (Last, First, Middle Initial)
Melton, Owen B.

Mailing Address
1098 Laurelwood

City **Carmel, IN 46032** State Zip Code

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

Name of Employer
Occupation
Retired Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / **08** / **2014**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Wallace, Bernadine

Mailing Address
1003 Overlook Road

City **Marion, IN 46952** State Zip Code

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

Name of Employer
Marion General Hospital Occupation
Health Care

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
07 / **25** / **2014**

Amount of Each Receipt this Period
500.00

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

2,000.00

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

4,970.00

**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) | | | | | | PAGE 1 OF 1 |
| | <input type="checkbox"/> 21b <input type="checkbox"/> 27 | <input type="checkbox"/> 22 <input type="checkbox"/> 28a | <input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b | <input type="checkbox"/> 24 <input type="checkbox"/> 28c | <input type="checkbox"/> 25 <input type="checkbox"/> 29 | <input type="checkbox"/> 26 <input type="checkbox"/> 30b | |

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NAME OF COMMITTEE (In Full)
STAR Financial Bank PAC

A. Kelly Mitchell for Indiana

Full Name (Last, First, Middle Initial)
Date of Disbursement: 07 / 09 / 2014

Mailing Address
P.O. Box 3114

City: Indianapolis, IN 46206

Purpose of Disbursement: 011
Amount of Each Disbursement this Period: 500.00

Candidate Name

Office Sought: State Treasurer
Disbursement For: Primary

State: IN District:

Dave Ober and Martin Carbaugh

Full Name (Last, First, Middle Initial)
Date of Disbursement: 07 / 21 / 2014

Mailing Address
1118 Skyline Pass

City: Fort Wayne, IN 46825

Purpose of Disbursement: 011
Amount of Each Disbursement this Period: 250.00

Candidate Name

Office Sought: State Reps.
Disbursement For: Primary

State: IN District:

C.

Full Name (Last, First, Middle Initial)
Date of Disbursement: / /

Mailing Address

City: State Zip Code

Purpose of Disbursement:
Amount of Each Disbursement this Period:

Candidate Name

Office Sought: State
Disbursement For: Primary

State: District:

SUBTOTAL of Disbursements This Page (optional)..... 750.00

TOTAL This Period (last page this line number only)..... 750.00

