

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA 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="2016"/> | <input type="text" value="5914.99"/> | <input type="text" value="5914.99"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="2444.17"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="4600.98"/> | <input type="text" value="15856.94"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="7045.15"/> | <input type="text" value="21771.93"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="5096.19"/> | <input type="text" value="19822.97"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="1948.96"/> | <input type="text" value="1948.96"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

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

| 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)..... | 3604.98 | 9278.94 |
| (ii) Unitemized | 996.00 | 6578.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 4600.98 | 15856.94 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 4600.98 | 15856.94 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 4600.98 | 15856.94 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 4600.98 | 15856.94 |

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 | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 4500.00 | 18250.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 596.19 | 1572.97 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 5096.19 | 19822.97 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 5096.19 | 19822.97 |

DETAILED SUMMARY PAGE
of Disbursements

| 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) | 4600.98 | 15856.94 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4600.98 | 15856.94 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

**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 6 OF 14 |
| <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)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Bachenheimer, Cara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9323 Old Mansion Road
 City Alexandria State VA Zip Code 22309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Sr. VP Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1916.64

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9399
 Amount of Each Receipt this Period 750.00
 Memo Item
 Biweekly PR ded of \$125 starting 07/15/16

B. Carter, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2650 Dade Avenue Apt 1517
 City Orlando State FL Zip Code 32804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Director of Operations - Sanford
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9403
 Amount of Each Receipt this Period 90.00
 Memo Item
 Biweekly PR ded of \$15 starting 07/15/16

C. Childers, Dean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3012 Whispering Shores
 City Vermilion State OH Zip Code 44089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Sr VP & GM - North America
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9404
 Amount of Each Receipt this Period 300.00
 Memo Item
 Biweekly PR ded of \$50 starting 07/15/16

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1140.00 |
| 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 7 OF 14 |
| <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)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Domanick, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 Franklin Lake Circle
 City Oxford State MI Zip Code 48371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Territory Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.30

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9405
 Amount of Each Receipt this Period 124.98
 Memo Item
 Biweekly PR ded of \$20.83 starting 07/15/16

B. Fox, Jerome E., , , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26114 Cobblestone Trail
 City Columbia Station State OH Zip Code 44028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) VP - Corporate Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9408
 Amount of Each Receipt this Period 90.00
 Memo Item
 Biweekly PR ded of \$15 starting 07/15/16

C. Gudbranson, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2521 Fairmount
 City Cleveland State OH Zip Code 44106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Chief Financial Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9410
 Amount of Each Receipt this Period 252.00
 Memo Item
 Biweekly PR ded of \$42 starting 07/15/16

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 466.98 |
| 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 8 OF 14 |
| <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)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Kline, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4488 Regal Circle
 City Akron State OH Zip Code 44321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Director Retail Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9416
 Amount of Each Receipt this Period 600.00
 Memo Item
 Biweekly PR ded of \$100 starting 07/15/16

B. Kovacs, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5341 Sturbridge Court
 City Sheffield Village State OH Zip Code 44054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) VP Customer Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9417
 Amount of Each Receipt this Period 90.00
 Memo Item
 Biweekly PR ded of \$15 starting 07/15/16

C. Nordquist, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 803 Allen Drive
 City Longmont State CO Zip Code 80503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Director Prod Mgmt, Custom Manual
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9423
 Amount of Each Receipt this Period 150.00
 Memo Item
 Biweekly PR ded of \$25 starting 07/15/16

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 840.00 |
| 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 9 OF 14 |
| <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)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Peterson, Bradford, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 Belle Avenue
 City Warwick State RI Zip Code 02889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) VP Prof Affairs & Clinical Education
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9424
 Amount of Each Receipt this Period 126.00
 Memo Item
 Biweekly PR ded of \$21 starting 07/15/16

B. Pickett, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 578 Ashley Way
 City Lexington State KY Zip Code 40503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Rehab Sales Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9425
 Amount of Each Receipt this Period 270.00
 Memo Item
 Biweekly PR ded of \$45 starting 07/15/16

C. Schuler, Gretchen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28710 Berkshire Drive
 City North Olmsted State OH Zip Code 44070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Director of Litigation Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 756.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9429
 Amount of Each Receipt this Period 252.00
 Memo Item
 Biweekly PR ded of \$42 starting 07/15/16

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 648.00 |
| 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 10 OF 14 |
| <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)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Stumpp, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1009 Jonathan Street
 City Amherst State OH Zip Code 44001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Director Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9433
 Amount of Each Receipt this Period 120.00
 Memo Item
 Biweekly PR ded of \$20 starting 07/15/16

B. Watkins, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4961 Hiddenview Court
 City North Ridgeville State OH Zip Code 44039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Sr VP Quality and Regulatory Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9434
 Amount of Each Receipt this Period 150.00
 Memo Item
 Biweekly PR ded of \$25 starting 07/15/16

C. Wilhelm, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2010 Gulf Road
 City Elyria State OH Zip Code 44035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Sales & Service Manager - TAG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.9435
 Amount of Each Receipt this Period 120.00
 Memo Item
 Biweekly PR ded of \$20 starting 07/15/16

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 390.00 |
| 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: PAGE 11 OF 14
(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)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zumsteg, Jacqueline, , ,

Mailing Address 812 Barbara Ann Lane

| | | |
|-----------------|-------------|-------------------|
| City Baldwin | State MO | Zip Code 63021 |
|-----------------|-------------|-------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Invacare Corporation | Occupation (for Individual) Manager - Contract Interiors & Design |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09 | | 30 | | 2016 |

Transaction ID : SA11AI.9437

Amount of Each Receipt this Period
120.00

Memo Item
Biweekly PR ded of \$20 starting 07/15/16

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 120.00 |
| TOTAL This Period (last page this line number only)..... | 3604.98 |

**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"/> 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)

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial)

A. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City
DUBUQUE

State
IA

Zip Code
52001

Purpose of Disbursement
Fundraising event of August 16

011

Category/
Type

Candidate Name

BLUM, RODNEY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 09 / 2016

FEC Identification Number

C H2IA01055

Transaction ID : SB23.9394

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DIANE BLACK FOR CONGRESS

Mailing Address PO BOX 1437

City
GALLATIN

State
TN

Zip Code
37066

Purpose of Disbursement
Fundraising event of July 23

011

Category/
Type

Candidate Name

BLACK, DIANE L MRS., , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

FEC Identification Number

C HOTN06257

Transaction ID : SB23.9390

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. GRASSLEY COMMITTEE INC

Mailing Address PO BOX 1000

City
DES MOINES

State
IA

Zip Code
50304

Purpose of Disbursement
Fundraising event of 09/16/16

001

Category/
Type

Candidate Name

GRASSLEY, CHARLES E SENATOR, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IA District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

FEC Identification Number

C S0IA00028

Transaction ID : SB23.9442

Amount of Each Disbursement this Period

500.00

Memo Item

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

1500.00

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

**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"/> 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 |

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)

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial)

A. PORTMAN FOR SENATE COMMITTEE

Mailing Address 8331 LITTLE HARBOR DRIVE

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement Fundraising event of April 26

011

Category/Type

Candidate Name

PORTMAN, ROB, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: OH District: 00

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

FEC Identification Number

C S00H00133

Transaction ID : SB23.9397

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PROMOTING OUR REPUBLICAN TEAM PAC

Mailing Address 8331 LITTLE HARBOR DRIVE

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement Fundraising event of 08/31/16

011

Category/Type

Candidate Name

PORTMAN, ROB, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: OH District: 00

Date of Disbursement

MM / DD / YYYY
08 / 22 / 2016

FEC Identification Number

C S00H00133

Transaction ID : SB23.9440

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

3000.00

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

4500.00

**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)

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

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NAME OF COMMITTEE (In Full)

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial)

A. PNC Bank

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 29 | | 2016 |

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Account Analysis Fee

| |
|-------------------|
| 001 |
| Category/ Type |

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : SB29.9438

Amount of Each Disbursement this Period

| |
|--------|
| 221.71 |
|--------|

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. PNC Bank

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Acct Analysis Fee

| |
|-------------------|
| 001 |
| Category/ Type |

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : SB29.9439

Amount of Each Disbursement this Period

| |
|--------|
| 154.58 |
|--------|

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. PNC Bank

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09 | | 30 | | 2016 |

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Account Analysis Fee

| |
|-------------------|
| 001 |
| Category/ Type |

FEC Identification Number

| |
|---|
| C |
|---|

Transaction ID : SB29.9446

Amount of Each Disbursement this Period

| |
|--------|
| 219.90 |
|--------|

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

| |
|--------|
| 596.19 |
|--------|

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

| |
|--------|
| 596.19 |
|--------|