

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

ADDRESS (number and street) ONE INVACARE WAY ELYRIA OH 44035

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00249896 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 11 / 29 / 2016 through 12 / 31 / 2016

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

Type or Print Name of Treasurer

Signature of Treasurer Fox, Jerome, E, , Jr. [Electronically Filed] Date 01 / 18 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**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"/>	<input type="text" value="5914.99"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1917.31"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2000.49"/>	<input type="text" value="19857.92"/>
(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="3917.80"/>	<input type="text" value="25772.91"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="343.59"/>	<input type="text" value="22198.70"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3574.21"/>	<input type="text" value="3574.21"/>
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 29 / 2016 To: M M / D D / Y Y Y Y 12 / 31 / 2016

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).....	1703.49	12584.92
(ii) Unitemized	297.00	7273.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2000.49	19857.92
(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)	2000.49	19857.92
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)).....▶	2000.49	19857.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2000.49	19857.92

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.....	0.00	20125.00
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).....	343.59	2073.70
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)) ..	343.59	22198.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	343.59	22198.70

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	2000.49	19857.92
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2000.49	19857.92
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"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 ▼ 2666.64

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9533
 Amount of Each Receipt this Period 375.00
 Memo Item
 Biweekly PR ded \$125 starting 11/30/16

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 ▼ 320.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9537
 Amount of Each Receipt this Period 45.00
 Memo Item
 Biweekly PR ded \$15 starting 11/30/16

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 ▼ 800.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9538
 Amount of Each Receipt this Period 150.00
 Memo Item
 Biweekly PR ded \$50 starting 11/30/16

SUBTOTAL of Receipts This Page (optional).....	570.00
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"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 ▼ 533.28

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9539
 Amount of Each Receipt this Period 62.49
 Memo Item
 Biweekly PR ded \$20.83 starting 11/30/16

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 ▼ 320.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9542
 Amount of Each Receipt this Period 45.00
 Memo Item
 Biweekly PR ded \$15 starting 11/30/16

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 ▼ 672.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9544
 Amount of Each Receipt this Period 126.00
 Memo Item
 Biweekly PR ded \$42 starting 11/30/16

SUBTOTAL of Receipts This Page (optional).....	233.49
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. Herb, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 County Road 40
 City Sullivan State OH Zip Code 44880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Manager - Corporate Documentation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9546
 Amount of Each Receipt this Period 30.00
 Memo Item
 Biweekly PR ded \$10 starting 11/30/16

B. Kish, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5541 Woodbury Hills Drive
 City Parma State OH Zip Code 44134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Accounting Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9549
 Amount of Each Receipt this Period 25.50
 Memo Item
 Biweekly PR ded \$8.50 starting 11/30/16

C. 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 ▼ 360.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9550
 Amount of Each Receipt this Period 45.00
 Memo Item
 Biweekly PR ded \$15 starting 11/30/16

SUBTOTAL of Receipts This Page (optional).....	100.50
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. Kuebler, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38554 Avalon Drive
 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) Engineering Manager - Respiratory
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9551
 Amount of Each Receipt this Period 30.00
 Memo Item
 Biweekly PR ded \$10 starting 11/30/16

B. Leneghan, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4482 Bradley Road
 City Westlake State OH Zip Code 44145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Corporate Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9552
 Amount of Each Receipt this Period 30.00
 Memo Item
 Biweekly PR ded \$10 starting 11/30/16

C. Maxwell, Phillip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19723 Stoughton Drive
 City Strongsville State OH Zip Code 44136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Manufacturing Manager - TS Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9555
 Amount of Each Receipt this Period 30.00
 Memo Item
 Biweekly PR ded \$10 starting 11/30/16

SUBTOTAL of Receipts This Page (optional).....	90.00
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. 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 ▼ 400.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9556
 Amount of Each Receipt this Period 75.00
 Memo Item
 Biweekly PR ded \$25 starting 11/30/16

B. 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 ▼ 336.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9557
 Amount of Each Receipt this Period 63.00
 Memo Item
 Biweekly PR ded \$21 starting 11/30/16

C. 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 ▼ 720.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9558
 Amount of Each Receipt this Period 135.00
 Memo Item
 Biweekly PR ded \$45 starting 11/30/16

SUBTOTAL of Receipts This Page (optional).....	273.00
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 11 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. Pruzan, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 Centennial Drive
 City Avon Lake State OH Zip Code 44012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invacare Corporation Occupation (for Individual) Senior Director Solutions Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9560
 Amount of Each Receipt this Period 25.50
 Memo Item
 Biweekly PR ded \$8.50 starting 11/30/16

B. Randall, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 Main Street
 City Lisbon Falls State ME Zip Code 04252
 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 ▼ 240.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9561
 Amount of Each Receipt this Period 30.00
 Memo Item
 Biweekly PR ded \$10 starting 11/30/16

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 ▼ 1008.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9562
 Amount of Each Receipt this Period 126.00
 Memo Item
 Biweekly PR ded \$42 starting 11/30/16

SUBTOTAL of Receipts This Page (optional).....	181.50
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 12 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 ▼ 400.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9566
 Amount of Each Receipt this Period 60.00
 Memo Item
 Biweekly PR ded \$20 starting 11/30/16

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 ▼ 400.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9567
 Amount of Each Receipt this Period 75.00
 Memo Item
 Biweekly PR ded \$25 starting 11/30/16

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 ▼ 480.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.9568
 Amount of Each Receipt this Period 60.00
 Memo Item
 Biweekly PR ded \$20 starting 11/30/16

SUBTOTAL of Receipts This Page (optional).....	195.00
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 13 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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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 ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2016

Transaction ID : SA11AI.9570

Amount of Each Receipt this Period
60.00

Memo Item
Biweekly PR ded \$20 starting 11/30/16

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).....▶	60.00
TOTAL This Period (last page this line number only).....▶	1703.49

**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

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. PNC Bank

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Account Analysis Fee

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 30 / 2016

FEC Identification Number

C []

Transaction ID : SB29.9571

Amount of Each Disbursement this Period

[] 186.10

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Account Analysis Fee

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 30 / 2016

FEC Identification Number

C []

Transaction ID : SB29.9572

Amount of Each Disbursement this Period

[] 157.49

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

[] 343.59

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

[] 343.59