

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Indiana Democratic Congressional Victory Committee

ADDRESS (number and street) One North Capitol Suite 200
 Check if different than previously reported. (ACC)
Indianapolis IN 46204

2. **FEC IDENTIFICATION NUMBER** C00108613
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 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 28 2006 through 12 31 2006

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 Ms. Sherrienne Standley

Signature of Treasurer Electronically Filed by Ms. Sherrienne Standley Date 06 04 2009

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

Office Use Only								
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Indiana Democratic Congressional Victory Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	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>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		286404.72
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	79390.86									
(c) Total Receipts (from Line 19)	244578.47	4124230.64								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	323969.33	4410635.36								
7. Total Disbursements (from Line 31)	270447.81	4357113.84								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	53521.52	53521.52								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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
Indiana Democratic Congressional Victory Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	24400.00	194795.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	2955.00	46535.49
(iii) TOTAL (add Lines 11(a)(i) and (ii)	27355.00	241330.49
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	26591.59	118216.85
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	53946.59	359547.34
12. Transfers From Affiliated/Other Party Committees	0.00	988201.50
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)	62769.17	755784.31
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	164.15	20194.07
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	127698.56	2000503.42
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	127698.56	2000503.42
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	244578.47	4124230.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	116879.91	2123727.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	15743.96	155937.10
(ii) Non-Federal Share.....	46151.82	585044.10
(b) Other Federal Operating Expenditures.....	38435.49	607029.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	100331.27	1348011.03
22. Transfers to Affiliated/Other Party Committees.....	-2000.00	141000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	25000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	134297.86
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.....	145601.79	1235556.36
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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	26514.75	1473248.59
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	26514.75	1473248.59
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	270447.81	4357113.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	224295.99	3772069.74

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)	53946.59	359547.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	53946.59	359547.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	54179.45	762966.93
37. Offsets to Operating Expenditures (from Line 15, page 3)	62769.17	755784.31
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-8589.72	7182.62

Form/Schedule : **F3XA**

Transaction ID :

Please note that the Committee is amending all reports from January 1, 2005, to present as a result of a comprehensive and expansive internal audit in which several financial discrepancies and irregularities were discovered. Please note that from January 1, 2005, through mid 2007, the Committee did not correctly report allocable expenses. This issue has been corrected on these amendments and has been reported correctly since its discovery in 2007. This issue is related to ADR 342. Furthermore, payments to canvassers during Fall 2006 have been included that were omitted from original reports.

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

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

FOR LINE NUMBER: PAGE 7 / 129
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
David Orentlicher

Mailing Address 5200 Grandview Dr

City State Zip Code
Indianapolis IN 46228-1938

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

Name of Employer IUPUI Occupation State Rep/Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 01 / 2006
Transaction ID: C79025
Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
Kevin Charles Murray

Mailing Address 990 Ellenberger Parkway West Dr

City State Zip Code
Indianapolis IN 46219-4439

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

Name of Employer Locke Reynolds Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4750.00

Date of Receipt 12 / 08 / 2006
Transaction ID: C217544
Amount of Each Receipt this Period 2500.00

C. Full Name (Last, First, Middle Initial)
Russell L. Brown

Mailing Address 6040 Honeywell Dr

City State Zip Code
Indianapolis IN 46236-6332

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

Name of Employer Clark Quinn Moses Scott & Grahn Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 08 / 2006
Transaction ID: C22112
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ► 2950.00

TOTAL This Period (last page this line number only) ►

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Sanjay N. Patel

Mailing Address 1501 Continental Dr

City State Zip Code
Zionsville IN 46077-9082

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

Name of Employer Occupation
VS Engineering Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
12 / 08 / 2006

Transaction ID: C42179

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Terry A. White

Mailing Address 4599 Woods Tower Dr

City State Zip Code
Newburgh IN 47630-9357

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

Name of Employer Occupation
Olsen, White & Hambidge Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
12 / 19 / 2006

Transaction ID: C211449

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
David J Carlson

Mailing Address 951 S Colony Rd

City State Zip Code
Evansville IN 47714-0641

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

Name of Employer Occupation
Evansville Surgical Asso Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
12 / 08 / 2006

Transaction ID: C214531

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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 9 / 129

(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)
Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)
Dennis M. Neidigh

Mailing Address 345 4th Ct E

City State Zip Code
Carmel IN 46033-1991

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

Name of Employer Occupation
Crawford Murphy & Tilly Civil Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2750.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: C167172

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
Louis Pearlman

Mailing Address 5 Hitching Post Rd

City State Zip Code
West Lafayette IN 47906-2100

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

Name of Employer Occupation
House Caucus Staff

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: C56945

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Anthem Blue Cross Blue Shield

Mailing Address PO Box 68086

City State Zip Code
Cincinnati OH 45206-8086

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 6

Transaction ID: C214803

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2950.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Floyd Hawkins

Mailing Address PO Box 681

City State Zip Code
Loogootee IN 47553

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

Name of Employer Occupation
U.S. Gypsum Electrician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 08 / 2006

Transaction ID: C29665

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Cordelia M. Lewis-Burks

Mailing Address 2943 N Kenwood Ave

City State Zip Code
Indianapolis IN 46208-5134

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
12 / 08 / 2006

Transaction ID: C224761

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
M. Tracy Boatwright

Mailing Address 8760 Wintergreen Way

City State Zip Code
Indianapolis IN 46256-4309

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

Name of Employer Occupation
Third House Advocacy Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
12 / 08 / 2006

Transaction ID: C138381

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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

**SCHEDULE A (FEC Form 3X)
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FOR LINE NUMBER: PAGE 11 / 129
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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey Smulyan
Mailing Address 5101 Green Braes East Dr
City Indianapolis State IN Zip Code 46234-2915
FEC ID number of contributing federal political committee. **C**
Name of Employer Emmis Communications Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2700.00
Date of Receipt 12 / 08 / 2006
Transaction ID: C225369
Amount of Each Receipt this Period 2500.00

B. Full Name (Last, First, Middle Initial)
Marie O'Brien
Mailing Address 1415 E Washington St
City South Bend State IN Zip Code 46617-3342
FEC ID number of contributing federal political committee. **C**
Name of Employer Links Mortgage Corp. Occupation Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 12 / 08 / 2006
Transaction ID: C214523
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Ed Doyle
Mailing Address 2458 Wayward Wind Dr
City Indianapolis State IN Zip Code 46239-9441
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 08 / 2006
Transaction ID: C62708
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 3250.00
TOTAL This Period (last page this line number only) ►

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Mark E. Maddox, Esq.
Mailing Address 7611 William Penn Dr
City Indianapolis State IN Zip Code 46256-2285
FEC ID number of contributing federal political committee. **C**
Name of Employer Maddox, Hargett & Caurso, PC Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 12 / 08 / 2006
Transaction ID: C118366
Amount of Each Receipt this Period 2500.00

B. Full Name (Last, First, Middle Initial)
Robert W. Browder
Mailing Address 2110 N Miller Ave
City Marion State IN Zip Code 46952-9293
FEC ID number of contributing federal political committee. **C**
Name of Employer CWA Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt 12 / 19 / 2006
Transaction ID: C40355
Amount of Each Receipt this Period 1500.00

C. Full Name (Last, First, Middle Initial)
James J. Jaksa
Mailing Address 3308 Pottawattomie Trl
City Michigan City State IN Zip Code 46360-1040
FEC ID number of contributing federal political committee. **C**
Name of Employer Horizon Bank Occupation Architect
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 12 / 08 / 2006
Transaction ID: C214525
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 4500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 13 / 129
(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)
Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)
Betsy Brand

Mailing Address 3640-4 Reflections Ln

City Indianapolis State IN Zip Code 46214-4083

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

Name of Employer state of indiana Occupation commissioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 08 / 2006

Transaction ID: C96779

Amount of Each Receipt this Period 150.00

B.

Full Name (Last, First, Middle Initial)
William E. Hall

Mailing Address 590 Robert Ct

City Greenfield State IN Zip Code 46140-9332

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

Name of Employer United Consulting Occupation Engineer Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6250.00

Date of Receipt 12 / 08 / 2006

Transaction ID: C70888

Amount of Each Receipt this Period 1500.00

C.

Full Name (Last, First, Middle Initial)
Donald S. Powers

Mailing Address 1501 Muirfield Dr

City Dyer State IN Zip Code 46311-1258

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

Name of Employer Community Healthcare Syst Occupation President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 08 / 2006

Transaction ID: C144287

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1900.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 14 / 129
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Mary Lou Terrell

Mailing Address 1600 N 14th St

City State Zip Code
Vincennes IN 47591-4808

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

Name of Employer: Knox County Housing Authority
Occupation: Exec. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt: 12 / 08 / 2006
Transaction ID: C194363
 Amount of Each Receipt this Period: 750.00

B. Full Name (Last, First, Middle Initial)
Heather Macek

Mailing Address 1325 N New Jersey St

City State Zip Code
Indianapolis IN 46202-2621

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

Name of Employer: Barnes & Thornburg
Occupation: Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt: 12 / 08 / 2006
Transaction ID: C42609
 Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Gregory L. Henneke

Mailing Address 700 N Alabama St
Apt 502

City State Zip Code
Indianapolis IN 46204-1354

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

Name of Employer: American Consulting
Occupation: Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10750.00

Date of Receipt: 12 / 08 / 2006
Transaction ID: C39017
 Amount of Each Receipt this Period: 3400.00

SUBTOTAL of Receipts This Page (optional) ► **4450.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey S. Fites

Mailing Address 3761 South County Rd 475 E

City State Zip Code
Plainfield IN 46168

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

Name of Employer Occupation
Indiana House of Representatives Media Relations

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: C193223

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
William A. Shields

Mailing Address 1129 Pyramid Dr

City State Zip Code
Gary IN 46407-1276

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

Name of Employer Occupation
Retired Educator Retired Educator

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: C167417

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Edward P. Martin

Mailing Address 650 Davis Ct

City State Zip Code
Indianapolis IN 46234-7521

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

Name of Employer Occupation
RW Beck Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: C92538

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

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 16 / 129
(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)
Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)
Brad Hartz

Mailing Address 5709 Station Hill Dr

City Avon State IN Zip Code 46123-7614

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

Name of Employer Veolia Occupation Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 08 / 2006

Transaction ID: C45906

Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
David J. Dant

Mailing Address 13057 Portsmouth Dr

City Carmel State IN Zip Code 46032-9498

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

Name of Employer Information Requested Occupation State Employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 08 / 2006

Transaction ID: C129873

Amount of Each Receipt this Period 300.00

C.

Full Name (Last, First, Middle Initial)
Alan P. Hogan

Mailing Address 661 E 9th St

City Indianapolis State IN Zip Code 46202-3462

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

Name of Employer RQAW Corporation Occupation Sale/Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 12 / 21 / 2006

Transaction ID: C115773

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 800.00

TOTAL This Period (last page this line number only) ► 24400.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 129

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Donnelly for Congress Committee

Mailing Address PO Box 1961

City State Zip Code
South Bend IN 46634-1961

FEC ID number of contributing federal political committee. **C** C00393652

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
76292.85

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 6

Transaction ID: C35310

Amount of Each Receipt this Period

12475.48

B.

Full Name (Last, First, Middle Initial)

MSCPAC

Mailing Address PO Box 594

City State Zip Code
Youngstown OH 44501-0594

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 6

Transaction ID: C23473

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Donnelly for Congress Committee

Mailing Address PO Box 1961

City State Zip Code
South Bend IN 46634-1961

FEC ID number of contributing federal political committee. **C** C00393652

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
76292.85

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 6

Transaction ID: C35306

Amount of Each Receipt this Period

3116.11

SUBTOTAL of Receipts This Page (optional)

16091.59

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 18 / 129
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial) ASDC - Dollars for Democrats		Date of Receipt
Mailing Address 430 S Capitol St SE		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>
City	State	Zip Code
Washington	DC	20003-4024
FEC ID number of contributing federal political committee.		Transaction ID: C174594
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text" value="8000.00"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="29000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Vectren Employees Federal PAC		Date of Receipt
Mailing Address PO Box 209		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>
City	State	Zip Code
Evansville	IN	47708
FEC ID number of contributing federal political committee.		Transaction ID: C219288
C C00240069		Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="26591.59"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 129
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Evan Bayh Committee

Mailing Address 1099 N Meridian St

City State Zip Code
Indianapolis IN 46204-1030

FEC ID number of contributing federal political committee. **C** C00306860

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
87524.85

Date of Receipt
MM / DD / YYYY
12 / 12 / 2006

Transaction ID: C82657

Amount of Each Receipt this Period
1832.95

Offset for payroll on Line 29

B. Full Name (Last, First, Middle Initial)
Julia Carson for Congress

Mailing Address 302 N East St

City State Zip Code
Indianapolis IN 46202-3611

FEC ID number of contributing federal political committee. **C** C00311969

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
72446.65

Date of Receipt
MM / DD / YYYY
12 / 11 / 2006

Transaction ID: C215068

Amount of Each Receipt this Period
5807.29

Offset for Payroll on Line 29

C. Full Name (Last, First, Middle Initial)
Evan Bayh Committee

Mailing Address 1099 N Meridian St

City State Zip Code
Indianapolis IN 46204-1030

FEC ID number of contributing federal political committee. **C** C00306860

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
87524.85

Date of Receipt
MM / DD / YYYY
12 / 28 / 2006

Transaction ID: C82660

Amount of Each Receipt this Period
43070.63

Offset for payroll on Line 29

SUBTOTAL of Receipts This Page (optional) ► **50710.87**

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 20 / 129
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Ellsworth for Congress Committee

Mailing Address PO Box 62

City State Zip Code
Evansville IN 47701

FEC ID number of contributing federal political committee. **C** C00412346

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
196378.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	0	6

Transaction ID: C46804

Amount of Each Receipt this Period
9748.95

Offset for payroll on Line 29

B. Full Name (Last, First, Middle Initial)
Committee to Bring Back Baron

Mailing Address PO Box 1071

City State Zip Code
Seymour IN 47274

FEC ID number of contributing federal political committee. **C** C00411835

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2309.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	6

Transaction ID: C17751959

Amount of Each Receipt this Period
2309.35

SUBTOTAL of Receipts This Page (optional)	12058.30
TOTAL This Period (last page this line number only)	62769.17

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

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

FOR LINE NUMBER: PAGE 21 / 129
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)
Old National Bank

Mailing Address PO Box 718

City State Zip Code
Evansville IN 47705-0718

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6331.57

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 6

Transaction ID: C17751970

Amount of Each Receipt this Period
0.30

B.

Full Name (Last, First, Middle Initial)
Old National Bank

Mailing Address PO Box 718

City State Zip Code
Evansville IN 47705-0718

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6331.57

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 6

Transaction ID: C17751968

Amount of Each Receipt this Period
163.85

SUBTOTAL of Receipts This Page (optional) ► **164.15**

TOTAL This Period (last page this line number only) ► **164.15**

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Linda K. Harris	Transaction ID: D280601 Date of Disbursement 12 / 28 / 2006
	Mailing Address 11129 Peppermill Ln	Amount of Each Disbursement this Period 750.00
	City Fishers State IN Zip Code 46037-9082	
	Purpose of Disbursement salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Anthem BCBS IN GROUP	Transaction ID: D7912 Date of Disbursement 12 / 04 / 2006
	Mailing Address PO Box 105113	Amount of Each Disbursement this Period 9010.19
	City Atlanta State GA Zip Code 30348-5113	
	Purpose of Disbursement health insurance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Anthem BCBS IN GROUP	Transaction ID: D365307 Date of Disbursement 12 / 23 / 2006
	Mailing Address PO Box 105113	Amount of Each Disbursement this Period 3623.16
	City Atlanta State GA Zip Code 30348-5113	
	Purpose of Disbursement Health Insurance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	13383.35
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Anthem BCBS IN GROUP <hr/> Mailing Address PO Box 105113 <hr/> City Atlanta State GA Zip Code 30348-5113 <hr/> Purpose of Disbursement Health Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365308 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 6
	Amount of Each Disbursement this Period 8524.46
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Anthem BCBS IN GROUP <hr/> Mailing Address PO Box 105113 <hr/> City Atlanta State GA Zip Code 30348-5113 <hr/> Purpose of Disbursement void of stale check Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D369980 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6
	Amount of Each Disbursement this Period -2888.56
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Anthem Life <hr/> Mailing Address Department L-8111 <hr/> City Columbus State OH Zip Code 43268-0001 <hr/> Purpose of Disbursement Life Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365309 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 6
	Amount of Each Disbursement this Period 608.84
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	6244.74
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address Cincinnati Commerce Ctr City Cincinnati State OH Zip Code 45999 Purpose of Disbursement State Check Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365867 Date of Disbursement 12 / 31 / 2006 Amount of Each Disbursement this Period -9002.53	
B.	Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address Cincinnati Commerce Ctr City Cincinnati State OH Zip Code 45999 Purpose of Disbursement State Check Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D366908 Date of Disbursement 12 / 31 / 2006 Amount of Each Disbursement this Period -9002.53	
C.	Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address Cincinnati Commerce Ctr City Cincinnati State OH Zip Code 45999 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7905 Date of Disbursement 11 / 30 / 2006 Amount of Each Disbursement this Period 8826.02	

SUBTOTAL of Disbursements This Page (optional)	-9179.04
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address Cincinnati Commerce Ctr City Cincinnati State OH Zip Code 45999 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7935 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	Amount of Each Disbursement this Period 7056.64
B.	Full Name (Last, First, Middle Initial) Indiana Dept of Workforce Development Mailing Address 10 N Senate Ave City Indianapolis State IN Zip Code 46204-2201 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7906 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	Amount of Each Disbursement this Period 61.50
C.	Full Name (Last, First, Middle Initial) Skyline Club Mailing Address 1 American Sq Fl 36 City Indianapolis State IN Zip Code 46282 Purpose of Disbursement Void of stale check Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D369977 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	Amount of Each Disbursement this Period -2542.87

SUBTOTAL of Disbursements This Page (optional)			4575.27
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Indiana Democratic State Central Committee	Transaction ID: D280599 Date of Disbursement
	Mailing Address 1 N Capitol Ave Ste 200	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
	City Indianapolis State IN Zip Code 46204-2223	Amount of Each Disbursement this Period
	Purpose of Disbursement Transfer to NF for cash flow	<input type="text" value="3179.54"/>
	Candidate Name Indiana Democratic State Central Committee	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Luke Clippinger	Transaction ID: D365866 Date of Disbursement
	Mailing Address 55 Arbor PI	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
	City New Albany State IN Zip Code 47150-7292	Amount of Each Disbursement this Period
	Purpose of Disbursement Stale Check	<input type="text" value="-888.48"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) SBC	Transaction ID: D365862 Date of Disbursement
	Mailing Address Bill Payment Ctr	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
	City Chicago State IL Zip Code 60663-0001	Amount of Each Disbursement this Period
	Purpose of Disbursement Stale Check	<input type="text" value="-255.07"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2035.99"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 27 / 129

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

<p>A. Full Name (Last, First, Middle Initial) SBC</p> <p>Mailing Address Bill Payment Ctr</p> <p>City Chicago State IL Zip Code 60663-0001</p> <p>Purpose of Disbursement State Check</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365863</p> <p>Date of Disbursement 12 / 31 / 2006</p> <p>Amount of Each Disbursement this Period -257.11</p>
<p>B. Full Name (Last, First, Middle Initial) Brady Hiatt</p> <p>Mailing Address 500 W 62nd St</p> <p>City Indianapolis State IN Zip Code 46260-4757</p> <p>Purpose of Disbursement State Check</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365860</p> <p>Date of Disbursement 12 / 31 / 2006</p> <p>Amount of Each Disbursement this Period -398.34</p>
<p>C. Full Name (Last, First, Middle Initial) Lisa Kramer</p> <p>Mailing Address 1520 Main St Apt 47</p> <p>City Vincennes State IN Zip Code 47591-6288</p> <p>Purpose of Disbursement State Check</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365865</p> <p>Date of Disbursement 12 / 31 / 2006</p> <p>Amount of Each Disbursement this Period -534.58</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-1190.03

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

<p>A. Full Name (Last, First, Middle Initial) South Bend Tribune</p> <p>Mailing Address 225 W Colfax Ave</p> <p>City South Bend State IN Zip Code 46626-1000</p> <p>Purpose of Disbursement advertisement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7938</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="168.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Hulman & Co.</p> <p>Mailing Address 900 Wabash Ave</p> <p>City Terre Haute State IN Zip Code 47807-3208</p> <p>Purpose of Disbursement utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7939</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1863.94"/></p>
<p>C. Full Name (Last, First, Middle Initial) Old National Bank</p> <p>Mailing Address PO Box 718</p> <p>City Evansville State IN Zip Code 47705-0718</p> <p>Purpose of Disbursement Bank Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365289</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="28.49"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2060.43"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Old National Bank</p> <p>Mailing Address PO Box 718</p> <p>City Evansville State IN Zip Code 47705-0718</p> <p>Purpose of Disbursement merchant fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D279833</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="99.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Old National Bank</p> <p>Mailing Address PO Box 718</p> <p>City Evansville State IN Zip Code 47705-0718</p> <p>Purpose of Disbursement merchant fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D279834</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="132.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Old National Bank</p> <p>Mailing Address PO Box 718</p> <p>City Evansville State IN Zip Code 47705-0718</p> <p>Purpose of Disbursement merchant fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D279835</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="66.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="297.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Old National Bank	Transaction ID: D365302 Date of Disbursement																			
	Mailing Address PO Box 718	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	6												
	City Evansville State IN Zip Code 47705-0718	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Merchant Fees Candidate Name	<table border="1"><tr><td>6.72</td></tr></table>	6.72																		
6.72																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Old National Bank	Transaction ID: D365303 Date of Disbursement																			
	Mailing Address PO Box 718	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	6												
	City Evansville State IN Zip Code 47705-0718	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Merchant Fees Candidate Name	<table border="1"><tr><td>56.00</td></tr></table>	56.00																		
56.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Old National Bank	Transaction ID: D365304 Date of Disbursement																			
	Mailing Address PO Box 718	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	6		2	0	0	6												
	City Evansville State IN Zip Code 47705-0718	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Merchant Fees Candidate Name	<table border="1"><tr><td>33.60</td></tr></table>	33.60																		
33.60																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>96.32</td></tr></table>	96.32
96.32		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Old National Bank	Transaction ID: D365305 Date of Disbursement
	Mailing Address PO Box 718	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
	City Evansville State IN Zip Code 47705-0718	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges	<input type="text" value="17.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ms. Melissa A Fisher	Transaction ID: D7888 Date of Disbursement
	Mailing Address 1223 E 10th St	<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
	City Indianapolis State IN Zip Code 46202-3470	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<input type="text" value="1315.65"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ms. Melissa A Fisher	Transaction ID: D7928 Date of Disbursement
	Mailing Address 1223 E 10th St	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
	City Indianapolis State IN Zip Code 46202-3470	Amount of Each Disbursement this Period
	Purpose of Disbursement carson payroll	<input type="text" value="1315.65"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2648.80"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Ms. Melissa A Fisher	Transaction ID: D7945 Date of Disbursement 12 / 29 / 2006
	Mailing Address 1223 E 10th St	
	City Indianapolis State IN Zip Code 46202-3470	Amount of Each Disbursement this Period 1315.65
	Purpose of Disbursement carson payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) The Courier-Journal	Transaction ID: D7913 Date of Disbursement 12 / 01 / 2006
	Mailing Address 525 W Broadway	
	City Louisville State KY Zip Code 40202-2206	Amount of Each Disbursement this Period 561.00
	Purpose of Disbursement advertisement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) The Louisville Cardinal	Transaction ID: D7915 Date of Disbursement 12 / 01 / 2006
	Mailing Address Houchens Bldg Rm 7	
	City Louisville State KY Zip Code 40292-0001	Amount of Each Disbursement this Period 9.12
	Purpose of Disbursement advertisement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1885.77
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Voluforms Mailing Address PO Box 399 City Jeffersonville State IN Zip Code 47131-0399 Purpose of Disbursement advertisement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7940 Date of Disbursement 12 / 22 / 2006
	Amount of Each Disbursement this Period 2309.35
	Category/Type
	Category/Type

B. Full Name (Last, First, Middle Initial) Avalon Caterers Mailing Address 109 Clermont Ave City Alexandria State VA Zip Code 22304-4837 Purpose of Disbursement catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8128 Date of Disbursement 12 / 29 / 2006
	Amount of Each Disbursement this Period 3695.20
	Category/Type
	Category/Type

C. Full Name (Last, First, Middle Initial) Altria Corporate Services, Inc. Mailing Address 6601 W Broad St City West End State VA Zip Code 23230-1723 Purpose of Disbursement catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8129 Date of Disbursement 12 / 29 / 2006
	Amount of Each Disbursement this Period 1300.00
	Category/Type
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ► **7304.55**

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Ms. Angela M. Nussmeyer	Transaction ID: D280593 Date of Disbursement 12 / 04 / 2006
	Mailing Address 1022 N Downey Ave	
	City Indianapolis State IN Zip Code 46219-3005	Amount of Each Disbursement this Period 1271.03
	Purpose of Disbursement salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Derek J. Sublette	Transaction ID: D280597 Date of Disbursement 12 / 28 / 2006
	Mailing Address 540 N Oriental St	
	City Indianapolis State IN Zip Code 46202-3559	Amount of Each Disbursement this Period 1297.78
	Purpose of Disbursement salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) IKON Office Solutions	Transaction ID: D280604 Date of Disbursement 12 / 28 / 2006
	Mailing Address PO Box 13487	
	City Macon State GA Zip Code 31208-3487	Amount of Each Disbursement this Period 1951.46
	Purpose of Disbursement copier Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4520.27
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)
Lake County Democratic Central Committee

Mailing Address 3901 W 15th Ave

City State Zip Code
Gary IN 46404-1711

Purpose of Disbursement
State Check
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: D365864
Date of Disbursement

1 2 / 3 1 / 2 0 0 6

Amount of Each Disbursement this Period

-5000.00

B.

Full Name (Last, First, Middle Initial)
Noble County Democratic Central Committee

Mailing Address 1772 N 750 E

City State Zip Code
Avilla IN 46710-9610

Purpose of Disbursement
State Check
Candidate Name
Noble County Democratic Central Committee

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: D365855
Date of Disbursement

1 2 / 3 1 / 2 0 0 6

Amount of Each Disbursement this Period

-650.00

C.

Full Name (Last, First, Middle Initial)
Lord Abbett

Mailing Address PO Box 219336

City State Zip Code
Kansas City MO 64121

Purpose of Disbursement
401K
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: D243610
Date of Disbursement

1 1 / 3 0 / 2 0 0 6

Amount of Each Disbursement this Period

864.16

SUBTOTAL of Disbursements This Page (optional) ▶

-4785.84

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Lord Abbett	Transaction ID: D7909
	Mailing Address PO Box 219336	Date of Disbursement MM / DD / YYYY 11 / 30 / 2006
	City Kansas City State MO Zip Code 64121	Amount of Each Disbursement this Period 1372.49
	Purpose of Disbursement 401K	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Lord Abbett	Transaction ID: D7937
	Mailing Address PO Box 219336	Date of Disbursement MM / DD / YYYY 12 / 22 / 2006
	City Kansas City State MO Zip Code 64121	Amount of Each Disbursement this Period 1372.49
	Purpose of Disbursement 401K	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Hamilton County Dem. Central Com.	Transaction ID: D365853
	Mailing Address PO Box 1018	Date of Disbursement MM / DD / YYYY 12 / 31 / 2006
	City Westfield State IN Zip Code 46074-1018	Amount of Each Disbursement this Period -50.00
	Purpose of Disbursement State Check	Category/ Type
	Candidate Name Hamilton County Dem. Central Com.	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	2694.98
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Wabash County Democrat Central Committee

Mailing Address 535 N Miami St

City Wabash State IN Zip Code 46992-1705

Purpose of Disbursement
State Check

Candidate Name
Wabash County Democrat Central Committee

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D365858

Date of Disbursement

12 / 31 / 2006

Amount of Each Disbursement this Period

-100.00

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address World Fin Ctr 31st Fl Ex Bldg AM

City New York State NY Zip Code 10285

Purpose of Disbursement
merchant fee

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D280595

Date of Disbursement

12 / 05 / 2006

Amount of Each Disbursement this Period

5.00

C. Full Name (Last, First, Middle Initial)
Indiana Department of Revenue

Mailing Address 100 North Senate Ave

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
payroll taxes

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D241116

Date of Disbursement

12 / 15 / 2006

Amount of Each Disbursement this Period

36.66

SUBTOTAL of Disbursements This Page (optional) ▶

-58.34

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Indiana Department of Revenue</p> <p>Mailing Address 100 North Senate Ave</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D241117</p> <p>Date of Disbursement 12 / 15 / 2006</p> <p>Amount of Each Disbursement this Period 288.24</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Indiana Department of Revenue</p> <p>Mailing Address 100 North Senate Ave</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D241134</p> <p>Date of Disbursement 11 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 1450.62</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Indiana Department of Revenue</p> <p>Mailing Address 100 North Senate Ave</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D241135</p> <p>Date of Disbursement 11 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 36.66</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1775.52

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Indiana Department of Revenue	Transaction ID: D7907 Date of Disbursement 11 / 30 / 2006
	Mailing Address 100 North Senate Ave	Amount of Each Disbursement this Period 1244.51
	City Indianapolis State IN Zip Code 46204	
	Purpose of Disbursement payroll taxes	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Indiana Department of Revenue	Transaction ID: D7936 Date of Disbursement 12 / 15 / 2006
	Mailing Address 100 North Senate Ave	Amount of Each Disbursement this Period 796.91
	City Indianapolis State IN Zip Code 46204	
	Purpose of Disbursement payroll taxes	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Jackson County Democratic Central	Transaction ID: D365854 Date of Disbursement 12 / 31 / 2006
	Mailing Address 4543 S County Rd 400 E	Amount of Each Disbursement this Period -800.00
	City Brownstown State IN Zip Code 47220	
	Purpose of Disbursement State Check	
	Candidate Name Jackson County Democratic Central	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1241.42
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) National City	Transaction ID: D7914 Date of Disbursement 12 / 01 / 2006
	Mailing Address 101 W Washington St	Amount of Each Disbursement this Period 2290.34
	City Indianapolis State IN Zip Code 46204	
	Purpose of Disbursement credit card payment Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Marriott Hotels	Transaction ID: D8010 Date of Disbursement 12 / 01 / 2006
	Mailing Address 350 W Maryland St	Amount of Each Disbursement this Period 546.64
	City Indianapolis State IN Zip Code 46225-1051	
	Purpose of Disbursement fundraising Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Marriott Hotels	Transaction ID: D8011 Date of Disbursement 12 / 01 / 2006
	Mailing Address 350 W Maryland St	Amount of Each Disbursement this Period 11.55
	City Indianapolis State IN Zip Code 46225-1051	
	Purpose of Disbursement election night expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	2290.34
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)
Clarinda L Landeros

Mailing Address 135 N Lafayette Blvd

City State Zip Code
South Bend IN 46601-1507

Purpose of Disbursement
reimbursement
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: D7916
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	6

Amount of Each Disbursement this Period

593.99

B.

Full Name (Last, First, Middle Initial)
Enterprise Car Rental

Mailing Address 4477 PROGRESS DR

City State Zip Code
South Bend IN 46628-5511

Purpose of Disbursement
Car Rental
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: D8045
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	6

Amount of Each Disbursement this Period

593.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

593.99

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

38435.49

**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)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input 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)

Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Indiana 7th District Democratic Committee

Mailing Address 1 N Capitol Ave
Ste 200

City Indianapolis State IN Zip Code 46204-2223

Purpose of Disbursement
Void of stale check

Candidate Name
Indiana 7th District Democratic Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D369965

Date of Disbursement

12 / 31 / 2006

Amount of Each Disbursement this Period

-2000.00

SUBTOTAL of Disbursements This Page (optional)

-2000.00

TOTAL This Period (last page this line number only)

-2000.00

**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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mr. Greg Guffey	Transaction ID: D23804 Date of Disbursement 12 / 04 / 2006
	Mailing Address 4133 E 61st St	Amount of Each Disbursement this Period 3035.00
	City Indianapolis State IN Zip Code 46220-4668	
	Purpose of Disbursement printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Greg Guffey	Transaction ID: D23805 Date of Disbursement 12 / 04 / 2006
	Mailing Address 4133 E 61st St	Amount of Each Disbursement this Period 600.00
	City Indianapolis State IN Zip Code 46220-4668	
	Purpose of Disbursement design	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mrs. Linda K. Harris	Transaction ID: D239376 Date of Disbursement 11 / 30 / 2006
	Mailing Address 11129 Peppermill Ln	Amount of Each Disbursement this Period 2761.38
	City Fishers State IN Zip Code 46037-9082	
	Purpose of Disbursement peterson payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6396.38
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Linda K. Harris	Transaction ID: D239638 Date of Disbursement 12 / 15 / 2006
	Mailing Address 11129 Peppermill Ln	Amount of Each Disbursement this Period 2761.38
	City Fishers State IN Zip Code 46037-9082	
	Purpose of Disbursement peterson payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mrs. Linda K. Harris	Transaction ID: D239640 Date of Disbursement 12 / 29 / 2006
	Mailing Address 11129 Peppermill Ln	Amount of Each Disbursement this Period 2761.38
	City Fishers State IN Zip Code 46037-9082	
	Purpose of Disbursement peterson payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: D239255 Date of Disbursement 12 / 15 / 2006
	Mailing Address Cincinnati Commerce Ctr	Amount of Each Disbursement this Period 9760.48
	City Cincinnati State OH Zip Code 45999	
	Purpose of Disbursement payroll taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15283.24
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address Cincinnati Commerce Ctr City Cincinnati State OH Zip Code 45999 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239009 Date of Disbursement 11 / 30 / 2006 Amount of Each Disbursement this Period 9395.90
B.	Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address Cincinnati Commerce Ctr City Cincinnati State OH Zip Code 45999 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239010 Date of Disbursement 11 / 30 / 2006 Amount of Each Disbursement this Period 177.50
C.	Full Name (Last, First, Middle Initial) Mr. Terry Burns Mailing Address 9432 Champton Dr City Indianapolis State IN Zip Code 46256-1063 Purpose of Disbursement marion co payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D237988 Date of Disbursement 12 / 15 / 2006 Amount of Each Disbursement this Period 1841.38

SUBTOTAL of Disbursements This Page (optional) ▶

11414.78

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mr. Terry Burns <hr/> Mailing Address 9432 Champton Dr <hr/> City Indianapolis State IN Zip Code 46256-1063 <hr/> Purpose of Disbursement marion co. payroll Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D238001 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1841.38</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	9		2	0	0	6	1841.38
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		2	9		2	0	0	6														
1841.38																							
B.	Full Name (Last, First, Middle Initial) Mr. Thomas O Sugar <hr/> Mailing Address 420 7th St NW Apt 605 <hr/> City Washington State DC Zip Code 20004-2212 <hr/> Purpose of Disbursement bayh payroll Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7952 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1079.09</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	9		2	0	0	6	1079.09
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		2	9		2	0	0	6														
1079.09																							
C.	Full Name (Last, First, Middle Initial) National City <hr/> Mailing Address 101 W Washington St <hr/> City Indianapolis State IN Zip Code 46204 <hr/> Purpose of Disbursement Void of State Check Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D369960 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">-1460.58</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	6	-1460.58
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		3	1		2	0	0	6														
-1460.58																							

SUBTOTAL of Disbursements This Page (optional) ▶

1459.89

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

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**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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms. Leatrice Webb-Parks <hr/> Mailing Address 5443 Milroy Rd <hr/> City Indianapolis State IN Zip Code 46216-2087 <hr/> Purpose of Disbursement marion co. payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239523 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 906.55
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Ms. Leatrice Webb-Parks <hr/> Mailing Address 5443 Milroy Rd <hr/> City Indianapolis State IN Zip Code 46216-2087 <hr/> Purpose of Disbursement marion co payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239525 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
	Amount of Each Disbursement this Period 906.55
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Ms. Leatrice Webb-Parks <hr/> Mailing Address 5443 Milroy Rd <hr/> City Indianapolis State IN Zip Code 46216-2087 <hr/> Purpose of Disbursement marion co. payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239743 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
	Amount of Each Disbursement this Period 906.55
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

2719.65

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)

PAGE 48 / 129

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Ms. Monica Lee Swintz	Transaction ID: D7895 Date of Disbursement 11 / 30 / 2006
	Mailing Address 3920 Noth Pennsylvania	Amount of Each Disbursement this Period 972.71
	City Indianapolis State IN Zip Code 46205	
	Purpose of Disbursement bayh payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Ms. Monica Lee Swintz	Transaction ID: D7932 Date of Disbursement 12 / 15 / 2006
	Mailing Address 3920 Noth Pennsylvania	Amount of Each Disbursement this Period 325.21
	City Indianapolis State IN Zip Code 46205	
	Purpose of Disbursement bayh payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Ms. Monica Lee Swintz	Transaction ID: D7954 Date of Disbursement 12 / 29 / 2006
	Mailing Address 3920 Noth Pennsylvania	Amount of Each Disbursement this Period 1270.40
	City Indianapolis State IN Zip Code 46205	
	Purpose of Disbursement bayh payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

2568.32

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mr. Joel Riethmiller	Transaction ID: D7892 Date of Disbursement 11 / 30 / 2006
	Mailing Address 506 N Indiana Ave	Amount of Each Disbursement this Period 783.84
	City Bloomington State IN Zip Code 47408-3620	
	Purpose of Disbursement hill payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Joel Riethmiller	Transaction ID: D7930 Date of Disbursement 12 / 15 / 2006
	Mailing Address 506 N Indiana Ave	Amount of Each Disbursement this Period 783.85
	City Bloomington State IN Zip Code 47408-3620	
	Purpose of Disbursement hill payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Joel Riethmiller	Transaction ID: D7949 Date of Disbursement 12 / 29 / 2006
	Mailing Address 506 N Indiana Ave	Amount of Each Disbursement this Period 783.85
	City Bloomington State IN Zip Code 47408-3620	
	Purpose of Disbursement hill payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2351.54

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Martin Mooradian	Transaction ID: D7890 Date of Disbursement 11 / 30 / 2006
	Mailing Address 122 Chanel Ter Apt 202	Amount of Each Disbursement this Period 1671.79
	City Falls Church State VA Zip Code 22046-4106	
	Purpose of Disbursement ellsworth payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Martin Mooradian	Transaction ID: D7929 Date of Disbursement 12 / 15 / 2006
	Mailing Address 122 Chanel Ter Apt 202	Amount of Each Disbursement this Period 1671.79
	City Falls Church State VA Zip Code 22046-4106	
	Purpose of Disbursement ellsworth payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr Jeremy Howser	Transaction ID: D7899 Date of Disbursement 11 / 30 / 2006
	Mailing Address 1214 Hatfield Dr	Amount of Each Disbursement this Period 2090.92
	City Evansville State IN Zip Code 47714-0715	
	Purpose of Disbursement ellsworth payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5434.50
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mr Jeremy Howser	Transaction ID: D7925 Date of Disbursement 12 / 15 / 2006
	Mailing Address 1214 Hatfield Dr	
	City Evansville State IN Zip Code 47714-0715	Amount of Each Disbursement this Period 2090.92
	Purpose of Disbursement ellsworth payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr Jeremy Howser	Transaction ID: D7943 Date of Disbursement 12 / 29 / 2006
	Mailing Address 1214 Hatfield Dr	
	City Evansville State IN Zip Code 47714-0715	Amount of Each Disbursement this Period 2090.92
	Purpose of Disbursement ellsworth payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr Jeremy Howser	Transaction ID: D280600 Date of Disbursement 12 / 28 / 2006
	Mailing Address 1214 Hatfield Dr	
	City Evansville State IN Zip Code 47714-0715	Amount of Each Disbursement this Period 2090.92
	Purpose of Disbursement ellsworth payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6272.76
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mrs. Abigail F. Curran <hr/> Mailing Address 7930 Carrleigh Pkwy <hr/> City Springfield State VA Zip Code 22152-1216 <hr/> Purpose of Disbursement hill payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7897 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 1814.79
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mrs. Abigail F. Curran <hr/> Mailing Address 7930 Carrleigh Pkwy <hr/> City Springfield State VA Zip Code 22152-1216 <hr/> Purpose of Disbursement hill payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7923 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
	Amount of Each Disbursement this Period 1814.79
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mrs. Abigail F. Curran <hr/> Mailing Address 7930 Carrleigh Pkwy <hr/> City Springfield State VA Zip Code 22152-1216 <hr/> Purpose of Disbursement hill payroll-bonus Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7924 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8629.58

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mrs. Abigail F. Curran <hr/> Mailing Address 7930 Carrleigh Pkwy <hr/> City Springfield State VA Zip Code 22152-1216 <hr/> Purpose of Disbursement hill payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7957 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
	Amount of Each Disbursement this Period 1814.79
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Laura Kirtley <hr/> Mailing Address 1001 Corregidor Cir <hr/> City Evansville State IN Zip Code 47714-3213 <hr/> Purpose of Disbursement ellsworth payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7886 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 988.66
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Kathie Nee <hr/> Mailing Address 18011 Cleveland Rd <hr/> City South Bend State IN Zip Code 46637-5064 <hr/> Purpose of Disbursement donnelly payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7891 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 2047.33
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4850.78

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Maire Gurevitz</p> <p>Mailing Address 9021 W 1225 N</p> <p>City Demotte State IN Zip Code 46310-9466</p> <p>Purpose of Disbursement carson payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7898</p> <p>Date of Disbursement 11 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 217.21</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Maire Gurevitz</p> <p>Mailing Address 9021 W 1225 N</p> <p>City Demotte State IN Zip Code 46310-9466</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D280605</p> <p>Date of Disbursement 12 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 217.21</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Carrie L Solomon</p> <p>Mailing Address 803 Canterbury Dr</p> <p>City Evansville State IN Zip Code 47715-4231</p> <p>Purpose of Disbursement ellsworth payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7894</p> <p>Date of Disbursement 11 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 943.76</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1378.18

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mr. Andrew Blair Lattanner <hr/> Mailing Address 51223 Hunting Ridge Trl N <hr/> City Granger State IN Zip Code 46530-6564 <hr/> Purpose of Disbursement donnelly payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7926 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
	Amount of Each Disbursement this Period 991.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Mr. Andrew Blair Lattanner <hr/> Mailing Address 51223 Hunting Ridge Trl N <hr/> City Granger State IN Zip Code 46530-6564 <hr/> Purpose of Disbursement donnelly payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7927 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
	Amount of Each Disbursement this Period 991.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Mr. Andrew Blair Lattanner <hr/> Mailing Address 51223 Hunting Ridge Trl N <hr/> City Granger State IN Zip Code 46530-6564 <hr/> Purpose of Disbursement donnelly payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7944 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
	Amount of Each Disbursement this Period 991.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2973.00
TOTAL This Period (last page this line number only) ▶	991.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

<p>A. Full Name (Last, First, Middle Initial) Elliott J Magers</p> <p>Mailing Address 7370 N 850 East</p> <p>City Brownsburg State IN Zip Code 46112</p> <p>Purpose of Disbursement hill payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7889</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>707.57</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	6	707.57
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	0	6													
707.57																						
<p>B. Full Name (Last, First, Middle Initial) Elliott J Magers</p> <p>Mailing Address 7370 N 850 East</p> <p>City Brownsburg State IN Zip Code 46112</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D280598</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>707.57</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	8	/	2	0	0	6	707.57
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	2	8	/	2	0	0	6													
707.57																						
<p>C. Full Name (Last, First, Middle Initial) George Guido</p> <p>Mailing Address 4610 Williamsburg Ct</p> <p>City Fort Wayne State IN Zip Code 46804-4009</p> <p>Purpose of Disbursement hayhurst payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D280603</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>322.07</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	8	/	2	0	0	6	322.07
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	2	8	/	2	0	0	6													
322.07																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td>1737.21</td> </tr> </table>	1737.21
1737.21		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td> </td> </tr> </table>	

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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mr. Andrew S Cullen <hr/> Mailing Address 821 N Main St <hr/> City Bicknell State IN Zip Code 47512-1319 <hr/> Purpose of Disbursement Void of stale check Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D369966 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6
	Amount of Each Disbursement this Period -995.36
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Sean Downey <hr/> Mailing Address 30 Hanover Street <hr/> City Manchester State NH Zip Code 03101 <hr/> Purpose of Disbursement bayh payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7941 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
	Amount of Each Disbursement this Period 3385.10
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Chris Hayler <hr/> Mailing Address 811 Burr Oaks Dr Unit 1207 <hr/> City West Des Moines State IA Zip Code 50266-6651 <hr/> Purpose of Disbursement bayh payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7942 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
	Amount of Each Disbursement this Period 3306.69
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5696.43

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Jennifer Linker	Transaction ID: D7946 Date of Disbursement 12 / 29 / 2006
	Mailing Address 1830 Calvert St NW Apt 1	Amount of Each Disbursement this Period 2938.85
	City Washington State DC Zip Code 20009-1936	
	Purpose of Disbursement bayh payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Howard D Pfeiffer	Transaction ID: D7947 Date of Disbursement 12 / 29 / 2006
	Mailing Address 1117 S St NW	Amount of Each Disbursement this Period 3909.26
	City Washington State DC Zip Code 20009-4326	
	Purpose of Disbursement bayh payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Andres Ramirez	Transaction ID: D7948 Date of Disbursement 12 / 29 / 2006
	Mailing Address 4001 China Cloud Dr	Amount of Each Disbursement this Period 3508.44
	City North Las Vegas State NV Zip Code 89031-2048	
	Purpose of Disbursement bayh payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10356.55
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

<p>A. Full Name (Last, First, Middle Initial) Chris D. Smith</p> <p>Mailing Address 5201 Dunstable Ln</p> <p>City Alexandria State VA Zip Code 22315-5515</p> <p>Purpose of Disbursement bayh payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7951</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1907.34"/></p>
<p>B. Full Name (Last, First, Middle Initial) Elizabeth Swickard</p> <p>Mailing Address 12026 White Cord Way</p> <p>City Columbia State MD Zip Code 21044-4505</p> <p>Purpose of Disbursement bayh payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7953</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1104.14"/></p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Trent Deckard</p> <p>Mailing Address 2609 S Southern Ridge Ct</p> <p>City Bloomington State IN Zip Code 47403-3415</p> <p>Purpose of Disbursement house payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7962</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1024.71"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4036.19"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 60 / 129

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mr. Trent Deckard	Transaction ID: D238246 Date of Disbursement MM / DD / YYYY 11 / 30 / 2006
	Mailing Address 2609 S Southern Ridge Ct	Amount of Each Disbursement this Period 1024.71
	City Bloomington State IN Zip Code 47403-3415	
	Purpose of Disbursement house payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Trent Deckard	Transaction ID: D238248 Date of Disbursement MM / DD / YYYY 12 / 15 / 2006
	Mailing Address 2609 S Southern Ridge Ct	Amount of Each Disbursement this Period 1024.71
	City Bloomington State IN Zip Code 47403-3415	
	Purpose of Disbursement house payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ms. Jennifer D Weiser	Transaction ID: D7964 Date of Disbursement MM / DD / YYYY 11 / 30 / 2006
	Mailing Address 1128 E 56th St	Amount of Each Disbursement this Period 1718.50
	City Indianapolis State IN Zip Code 46220-3222	
	Purpose of Disbursement hill payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3767.92

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

<p>A. Full Name (Last, First, Middle Initial) Mr Nicholas Grawcock</p> <p>Mailing Address 5954 Dewey Ave</p> <p>City Indianapolis State IN Zip Code 46219-7209</p> <p>Purpose of Disbursement marion co. payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D238113</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="784.80"/></p>
<p>B. Full Name (Last, First, Middle Initial) Mr Nicholas Grawcock</p> <p>Mailing Address 5954 Dewey Ave</p> <p>City Indianapolis State IN Zip Code 46219-7209</p> <p>Purpose of Disbursement marion co. payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D238114</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="784.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Mr Nicholas Grawcock</p> <p>Mailing Address 5954 Dewey Ave</p> <p>City Indianapolis State IN Zip Code 46219-7209</p> <p>Purpose of Disbursement marion co. payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D238123</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="784.80"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2353.60"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Ryan Alexander</p> <p>Mailing Address 8508 16th St</p> <p>City Silver Spring State MD Zip Code 20910</p> <p>Purpose of Disbursement bayh payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7955</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1303.63"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Matthew Weisman</p> <p>Mailing Address 3114 Green River Dr</p> <p>City Evansville State IN Zip Code 47715</p> <p>Purpose of Disbursement ellsworth payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7896</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1969.74"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Ms. Angela M. Nussmeyer</p> <p>Mailing Address 1022 N Downey Ave</p> <p>City Indianapolis State IN Zip Code 46219-3005</p> <p>Purpose of Disbursement senate payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D238441</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1271.03"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4544.40"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms. Angela M. Nussmeyer <hr/> Mailing Address 1022 N Downey Ave <hr/> City Indianapolis State IN Zip Code 46219-3005 <hr/> Purpose of Disbursement senate payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D238452 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 1271.03
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mr. Derek J. Sublette <hr/> Mailing Address 540 N Oriental St <hr/> City Indianapolis State IN Zip Code 46202-3559 <hr/> Purpose of Disbursement pearson payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D237975 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 1297.78
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mrs. Michele Miller <hr/> Mailing Address 11342 Fairweather Pl <hr/> City Indianapolis State IN Zip Code 46229-4982 <hr/> Purpose of Disbursement peterson payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239083 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
	Amount of Each Disbursement this Period 1176.79
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3745.60
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Michele Miller	Transaction ID: D239102 Date of Disbursement 11 / 30 / 2006
	Mailing Address 11342 Fairweather Pl	
	City Indianapolis State IN Zip Code 46229-4982	Amount of Each Disbursement this Period 1176.79
	Purpose of Disbursement peterson payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mrs. Michele Miller	Transaction ID: D238732 Date of Disbursement 12 / 15 / 2006
	Mailing Address 11342 Fairweather Pl	
	City Indianapolis State IN Zip Code 46229-4982	Amount of Each Disbursement this Period 1176.79
	Purpose of Disbursement peterson payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Charlene M. Beaver	Transaction ID: D27441 Date of Disbursement 12 / 04 / 2006
	Mailing Address 8388 East 116th St	
	City Fishers State IN Zip Code 46038	Amount of Each Disbursement this Period 1950.00
	Purpose of Disbursement accountant	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	4303.58
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Jeanette Vanausdall <hr/> Mailing Address 6951 Bluffridge Way <hr/> City Indianapolis State IN Zip Code 46278-1864 <hr/> Purpose of Disbursement office expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D28763 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1241.40</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	6	1241.40
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	4		2	0	0	6														
1241.40																							
B.	Full Name (Last, First, Middle Initial) Mr. Tim Moriarty <hr/> Mailing Address 129 Catherine Dr <hr/> City Carmel State IN Zip Code 46032-1421 <hr/> Purpose of Disbursement marion co. payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242162 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">637.34</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0	6	637.34
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		3	0		2	0	0	6														
637.34																							
C.	Full Name (Last, First, Middle Initial) Mr. Tim Moriarty <hr/> Mailing Address 129 Catherine Dr <hr/> City Carmel State IN Zip Code 46032-1421 <hr/> Purpose of Disbursement kennedy payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242163 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">637.34</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	6	637.34
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		1	5		2	0	0	6														
637.34																							

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="font-weight: bold;">2516.08</td> </tr> </table>	2516.08
2516.08		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="height: 20px;"></td> </tr> </table>	

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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mr. Tim Moriarty	Transaction ID: D242165 Date of Disbursement 12 / 29 / 2006
	Mailing Address 129 Catherine Dr	Amount of Each Disbursement this Period 637.34
	City Carmel State IN Zip Code 46032-1421	
	Purpose of Disbursement kennedy payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ms Karina E. Straub	Transaction ID: D242764 Date of Disbursement 12 / 29 / 2006
	Mailing Address 1451 Central Ave Apt 107	Amount of Each Disbursement this Period 1119.59
	City Indianapolis State IN Zip Code 46202	
	Purpose of Disbursement kennedy payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ms Karina E. Straub	Transaction ID: D242765 Date of Disbursement 12 / 15 / 2006
	Mailing Address 1451 Central Ave Apt 107	Amount of Each Disbursement this Period 1119.59
	City Indianapolis State IN Zip Code 46202	
	Purpose of Disbursement kennedy payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2876.52
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms Karina E. Straub <hr/> Mailing Address 1451 Central Ave Apt 107 <hr/> City Indianapolis State IN Zip Code 46202 <hr/> Purpose of Disbursement Kennedy payroll-bonus Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242766 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Ms Karina E. Straub <hr/> Mailing Address 1451 Central Ave Apt 107 <hr/> City Indianapolis State IN Zip Code 46202 <hr/> Purpose of Disbursement Kennedy payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242767 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 1119.59
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Ms Karina E. Straub <hr/> Mailing Address 1451 Central Ave Apt 107 <hr/> City Indianapolis State IN Zip Code 46202 <hr/> Purpose of Disbursement void of stale check Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D369982 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6
	Amount of Each Disbursement this Period -1138.94
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	480.65
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

<p>A. Full Name (Last, First, Middle Initial) Ms. Jennifer L. Grawcock</p> <p>Mailing Address 5954 Dewey Ave</p> <p>City Indianapolis State IN Zip Code 46219</p> <p>Purpose of Disbursement marion co. payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D242915</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1427.54"/></p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Jennifer L. Grawcock</p> <p>Mailing Address 5954 Dewey Ave</p> <p>City Indianapolis State IN Zip Code 46219</p> <p>Purpose of Disbursement marion co. payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D242916</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1427.54"/></p>
<p>C. Full Name (Last, First, Middle Initial) Ms. Jennifer L. Grawcock</p> <p>Mailing Address 5954 Dewey Ave</p> <p>City Indianapolis State IN Zip Code 46219</p> <p>Purpose of Disbursement marion co. payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D242917</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1427.54"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

4282.62

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Ms Kristen L Self	Transaction ID: D242989 Date of Disbursement
	Mailing Address 8813 Sunbow Dr	<input type="text" value="12"/> <input type="text" value="29"/> / <input type="text" value="2006"/>
	City Indianapolis State IN Zip Code 46231	Amount of Each Disbursement this Period
	Purpose of Disbursement house payroll	<input type="text" value="1532.29"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Ms Kristen L Self	Transaction ID: D242990 Date of Disbursement
	Mailing Address 8813 Sunbow Dr	<input type="text" value="12"/> <input type="text" value="15"/> / <input type="text" value="2006"/>
	City Indianapolis State IN Zip Code 46231	Amount of Each Disbursement this Period
	Purpose of Disbursement house payroll	<input type="text" value="1532.29"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Ms Kristen L Self	Transaction ID: D242991 Date of Disbursement
	Mailing Address 8813 Sunbow Dr	<input type="text" value="11"/> <input type="text" value="30"/> / <input type="text" value="2006"/>
	City Indianapolis State IN Zip Code 46231	Amount of Each Disbursement this Period
	Purpose of Disbursement house payroll	<input type="text" value="1532.29"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Ms. Myla Eldridge	Transaction ID: D243571 Date of Disbursement 11 / 30 / 2006
	Mailing Address 2017 W 63rd St	Amount of Each Disbursement this Period 1142.01
	City Indianapolis State IN Zip Code 46260	
	Purpose of Disbursement kennedy payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ms Amy Jacobson	Transaction ID: D243641 Date of Disbursement 12 / 29 / 2006
	Mailing Address 5109 Tuscany Ln	Amount of Each Disbursement this Period 693.48
	City Indianapolis State IN Zip Code 46254	
	Purpose of Disbursement senate payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ms Amy Jacobson	Transaction ID: D243642 Date of Disbursement 12 / 04 / 2006
	Mailing Address 5109 Tuscany Ln	Amount of Each Disbursement this Period 693.48
	City Indianapolis State IN Zip Code 46254	
	Purpose of Disbursement senate payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2528.97
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

<p>A. Full Name (Last, First, Middle Initial) Ms Amy Jacobson</p> <p>Mailing Address 5109 Tuscany Ln</p> <p>City Indianapolis State IN Zip Code 46254</p> <p>Purpose of Disbursement senate payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D243643 Date of Disbursement 11 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 693.48</p>
<p>B. Full Name (Last, First, Middle Initial) Megan Sims</p> <p>Mailing Address 612 E 13th St</p> <p>City Indianapolis State IN Zip Code 46202-2732</p> <p>Purpose of Disbursement carson payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7893 Date of Disbursement 11 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 779.04</p>
<p>C. Full Name (Last, First, Middle Initial) Megan Sims</p> <p>Mailing Address 612 E 13th St</p> <p>City Indianapolis State IN Zip Code 46202-2732</p> <p>Purpose of Disbursement carson payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7931 Date of Disbursement 12 / 15 / 2006</p> <p>Amount of Each Disbursement this Period 779.04</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2251.56

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Megan Sims	Transaction ID: D7950
	Mailing Address 612 E 13th St	Date of Disbursement 12 / 29 / 2006
	City Indianapolis State IN Zip Code 46202-2732	Amount of Each Disbursement this Period 779.04
	Purpose of Disbursement carson payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mrs. Barbara Ziemer	Transaction ID: D243829
	Mailing Address 804 Kingswood Dr	Date of Disbursement 12 / 29 / 2006
	City Evansville State IN Zip Code 47715	Amount of Each Disbursement this Period 682.92
	Purpose of Disbursement weinzapfel payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mrs. Barbara Ziemer	Transaction ID: D243830
	Mailing Address 804 Kingswood Dr	Date of Disbursement 12 / 15 / 2006
	City Evansville State IN Zip Code 47715	Amount of Each Disbursement this Period 682.92
	Purpose of Disbursement weinzapfel payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2144.88
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Barbara Ziemer Mailing Address 804 Kingswood Dr City Evansville State IN Zip Code 47715 Purpose of Disbursement weinzapfel payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D243831 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	Amount of Each Disbursement this Period 682.92
B.	Full Name (Last, First, Middle Initial) Mr. Timothy J. Jeffers Mailing Address 6854 Chorleywood Cir City Indianapolis State IN Zip Code 46259-5501 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241727 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	Amount of Each Disbursement this Period 2929.54
C.	Full Name (Last, First, Middle Initial) Mr. Timothy J. Jeffers Mailing Address 6854 Chorleywood Cir City Indianapolis State IN Zip Code 46259-5501 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241729 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6	Amount of Each Disbursement this Period 2626.54

SUBTOTAL of Disbursements This Page (optional) ▶	6239.00
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Timothy J. Jeffers

Mailing Address 6854 Chorleywood Cir

City Indianapolis State IN Zip Code 46259-5501

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D241748

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

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)

PAGE 76 / 129

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Kim Gore Mailing Address City State Zip Code Purpose of Disbursement canvasser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365299 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) Jewett Printing Mailing Address 101 W Ohio St Ste 2000 City Indianapolis State IN Zip Code 46204-4204 Purpose of Disbursement State Check Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365859 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6
	Amount of Each Disbursement this Period -333.90
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) Jewett Printing Mailing Address 101 W Ohio St Ste 2000 City Indianapolis State IN Zip Code 46204-4204 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D334576 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6
	Amount of Each Disbursement this Period 1016.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	792.10
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 77 / 129

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Jewett Printing	Transaction ID: D7975 Date of Disbursement 12 / 01 / 2006
	Mailing Address 101 W Ohio St Ste 2000	Amount of Each Disbursement this Period 6760.14
	City Indianapolis State IN Zip Code 46204-4204	
	Purpose of Disbursement mailing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jewett Printing	Transaction ID: D7994 Date of Disbursement 12 / 22 / 2006
	Mailing Address 101 W Ohio St Ste 2000	Amount of Each Disbursement this Period 1115.35
	City Indianapolis State IN Zip Code 46204-4204	
	Purpose of Disbursement direct mail	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Darrell Dodds	Transaction ID: D365290 Date of Disbursement 12 / 04 / 2006
	Mailing Address	Amount of Each Disbursement this Period 350.00
	City State Zip Code	
	Purpose of Disbursement field staff	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8225.49

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Marvin Gandy <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365291 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
	Amount of Each Disbursement this Period 300.00
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

B. Full Name (Last, First, Middle Initial) Rob Hogan <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365292 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
	Amount of Each Disbursement this Period 300.00
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

C. Full Name (Last, First, Middle Initial) Anton Davis <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365293 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
	Amount of Each Disbursement this Period 325.00
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

SUBTOTAL of Disbursements This Page (optional) ▶

925.00

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Marcia Benman	Transaction ID: D365294
	Mailing Address	Date of Disbursement 12 / 04 / 2006
	City State Zip Code	Amount of Each Disbursement this Period 157.50
	Purpose of Disbursement field staff	Category/ Type
	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Marcia Benman	Transaction ID: D365296
	Mailing Address	Date of Disbursement 12 / 04 / 2006
	City State Zip Code	Amount of Each Disbursement this Period 92.50
	Purpose of Disbursement canvasser	Category/ Type
	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) James Humphrey	Transaction ID: D365298
	Mailing Address	Date of Disbursement 12 / 04 / 2006
	City State Zip Code	Amount of Each Disbursement this Period 425.00
	Purpose of Disbursement canvasser	Category/ Type
	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	675.00
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Voter Activation Network LLC	Transaction ID: D7990 Date of Disbursement																			
	Mailing Address 54 Regent St	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	6												
	City Cambridge State MA Zip Code 02140-2112	Amount of Each Disbursement this Period																			
	Purpose of Disbursement voter file maintenance	<table border="1"><tr><td>4000.00</td></tr></table>	4000.00																		
4000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Mr. Daniel J Parker	Transaction ID: D8037 Date of Disbursement																			
	Mailing Address 7458 Rooses Way	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	0	6												
	City Indianapolis State IN Zip Code 46217-5484	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll	<table border="1"><tr><td>2828.29</td></tr></table>	2828.29																		
2828.29																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Ms Elizabeth Palmquist	Transaction ID: D238422 Date of Disbursement																			
	Mailing Address 705 Dogwood Rd	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	0	6												
	City Jeffersonville State IN Zip Code 47130-5417	Amount of Each Disbursement this Period																			
	Purpose of Disbursement field staff	<table border="1"><tr><td>100.00</td></tr></table>	100.00																		
100.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>6928.29</td></tr></table>	6928.29
6928.29		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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"/> 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 checked="" 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)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Brian Connell	Transaction ID: D7908 Date of Disbursement 11 / 30 / 2006
	Mailing Address 1290 Hatfield Drive Apt. 1140	Amount of Each Disbursement this Period 825.00
	City Evansville State IN Zip Code 47714	
	Purpose of Disbursement field staff	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Dustin Blythe	Transaction ID: D7904 Date of Disbursement 11 / 30 / 2006
	Mailing Address 1732 1/2 Lincolnway E	Amount of Each Disbursement this Period 750.00
	City Mishawaka State IN Zip Code 46544-3116	
	Purpose of Disbursement field staff	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Dustin Blythe	Transaction ID: D7933 Date of Disbursement 12 / 15 / 2006
	Mailing Address 1732 1/2 Lincolnway E	Amount of Each Disbursement this Period 750.00
	City Mishawaka State IN Zip Code 46544-3116	
	Purpose of Disbursement segregated	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2325.00
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Maria Angelica Aguayo	Transaction ID: D7956 Date of Disbursement 12 / 29 / 2006
	Mailing Address 3040 East County Rd 200 North	Amount of Each Disbursement this Period 550.00
	City North Vernon State IN Zip Code 47265	
	Purpose of Disbursement field staff	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) John Yaggi	Transaction ID: D7577 Date of Disbursement 12 / 28 / 2006
	Mailing Address 2528 Walnut Pike Drive	Amount of Each Disbursement this Period 900.00
	City Bloomington State IN Zip Code 47401	
	Purpose of Disbursement field staff	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) John Yaggi	Transaction ID: D369961 Date of Disbursement 12 / 31 / 2006
	Mailing Address 2528 Walnut Pike Drive	Amount of Each Disbursement this Period -900.00
	City Bloomington State IN Zip Code 47401	
	Purpose of Disbursement Void of stale check	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	550.00
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms. Christen A Commers <hr/> Mailing Address 5698 W Pleasant Hills Trl <hr/> City La Porte State IN Zip Code 46350-8448 <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7902 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 750.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ms. Christen A Commers <hr/> Mailing Address 5698 W Pleasant Hills Trl <hr/> City La Porte State IN Zip Code 46350-8448 <hr/> Purpose of Disbursement segregated Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7934 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
	Amount of Each Disbursement this Period 750.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Kallie Crume <hr/> Mailing Address 817 Colonial Park Dr Apt 3 <hr/> City Jeffersonville State IN Zip Code 47130-4649 <hr/> Purpose of Disbursement canvasser Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7922 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6
	Amount of Each Disbursement this Period 405.50
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1905.50
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) David Joseph	Transaction ID: D7900 Date of Disbursement 11 / 30 / 2006
	Mailing Address 1762 U St NW Apt B	Amount of Each Disbursement this Period 1427.21
	City Washington State DC Zip Code 20009-1793	
	Purpose of Disbursement field staff Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Travis Levett	Transaction ID: D7903 Date of Disbursement 11 / 30 / 2006
	Mailing Address 803 W 69th Ter	Amount of Each Disbursement this Period 825.00
	City Kansas City State MO Zip Code 64113-2033	
	Purpose of Disbursement field staff Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) EZ Mailing Service, Inc.	Transaction ID: D7993 Date of Disbursement 12 / 22 / 2006
	Mailing Address 1836 Executive Dr	Amount of Each Disbursement this Period 781.68
	City Indianapolis State IN Zip Code 46241-4308	
	Purpose of Disbursement direct mail Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3033.89

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Greg Brown <hr/> Mailing Address info requested <hr/> City South Bend State IN Zip Code 46601 <hr/> Purpose of Disbursement canvasser Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365301 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6 <hr/> Amount of Each Disbursement this Period 800.00
B.	Full Name (Last, First, Middle Initial) Antionette Brandon <hr/> Mailing Address info requested <hr/> City South Bend State IN Zip Code 46601 <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365295 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6 <hr/> Amount of Each Disbursement this Period 157.50
C.	Full Name (Last, First, Middle Initial) Benita Owens <hr/> Mailing Address info requested <hr/> City South Bend State IN Zip Code 46601 <hr/> Purpose of Disbursement canvasser Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365297 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6 <hr/> Amount of Each Disbursement this Period 185.00

SUBTOTAL of Disbursements This Page (optional) ▶

1142.50

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Felicia Smith <hr/> Mailing Address info requested <hr/> City South Bend State IN Zip Code 46601 <hr/> Purpose of Disbursement canvasser Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D365300 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
	Amount of Each Disbursement this Period 150.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Jorga Dale <hr/> Mailing Address 135 S Lafayette Blvd <hr/> City South Bend State IN Zip Code 46601-1518 <hr/> Purpose of Disbursement canvasser Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7917 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
	Amount of Each Disbursement this Period 225.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) James Steele <hr/> Mailing Address 135 S Lafayette Blvd <hr/> City South Bend State IN Zip Code 46601-1518 <hr/> Purpose of Disbursement canvasser Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D7918 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
	Amount of Each Disbursement this Period 185.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	560.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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"/> 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Marcus Humphrey	Transaction ID: D7919 Date of Disbursement 12 / 04 / 2006
	Mailing Address 135 S Lafayette Blvd	Amount of Each Disbursement this Period 185.00
	City South Bend State IN Zip Code 46601-1518	
	Purpose of Disbursement canvasser	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mike Boykins	Transaction ID: D7920 Date of Disbursement 12 / 04 / 2006
	Mailing Address 135 S Lafayette Blvd	Amount of Each Disbursement this Period 225.00
	City South Bend State IN Zip Code 46601-1518	
	Purpose of Disbursement canvasser	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Angela Thompson	Transaction ID: D7921 Date of Disbursement 12 / 04 / 2006
	Mailing Address Information Requested	Amount of Each Disbursement this Period 145.00
	City Eckerty State IN Zip Code 47116	
	Purpose of Disbursement canvasser	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

555.00

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms. Katherine Carlson <hr/> Mailing Address 1235 N Delaware St Apt 206 <hr/> City Indianapolis State IN Zip Code 46202 <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D243693 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 6
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mrs. Amy Clinton-Corbett <hr/> Mailing Address 1420 Shining Armor Ln <hr/> City West Lafayette State IN Zip Code 47906 <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D243704 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 140.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ms. Sara Foor <hr/> Mailing Address 1615 Knox Dr <hr/> City New Haven State IN Zip Code 46774 <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D243719 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	340.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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"/> 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms. Emily Liddle <hr/> Mailing Address 5547 Winthrop Ave Apt B <hr/> City Indianapolis State IN Zip Code 46220 <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D243731 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 6
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Mr. Justin Moed <hr/> Mailing Address 50 N Illinois St Apt 311 <hr/> City Indianapolis State IN Zip Code 46204-2846 <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D243743 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Mr. Matthew Mooney <hr/> Mailing Address 1006 Lancashire Ln <hr/> City Pendleton State IN Zip Code 46064 <hr/> Purpose of Disbursement field staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D243755 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6
	Amount of Each Disbursement this Period 750.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

950.00

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mr. Matthew Mooney	Transaction ID: D243756 Date of Disbursement
	Mailing Address 1006 Lancashire Ln	<input type="text" value="12"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="06"/>
	City Pendleton State IN Zip Code 46064	Amount of Each Disbursement this Period
	Purpose of Disbursement field staff	<input type="text" value="1400.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mr. Matthew Mooney	Transaction ID: D243757 Date of Disbursement
	Mailing Address 1006 Lancashire Ln	<input type="text" value="11"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="06"/>
	City Pendleton State IN Zip Code 46064	Amount of Each Disbursement this Period
	Purpose of Disbursement field staff	<input type="text" value="100.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mr. Jared Sloane	Transaction ID: D243778 Date of Disbursement
	Mailing Address 405 E South St Apt G	<input type="text" value="11"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="06"/>
	City Washington State IN Zip Code 47501	Amount of Each Disbursement this Period
	Purpose of Disbursement field staff	<input type="text" value="100.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Ms. Megan Giles	Transaction ID: D243790 Date of Disbursement 12 / 28 / 2006
	Mailing Address 3055 N Meridian St Apt 3	Amount of Each Disbursement this Period 147.07
	City Indianapolis State IN Zip Code 46208	
	Purpose of Disbursement field staff	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PrimePay	Transaction ID: D369971 Date of Disbursement 12 / 31 / 2006
	Mailing Address 9382 Priority Way West Dr	Amount of Each Disbursement this Period -4752.59
	City Indianapolis State IN Zip Code 46240	
	Purpose of Disbursement Void of stale check	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Indiana Department of Revenue	Transaction ID: D365096 Date of Disbursement 12 / 15 / 2006
	Mailing Address 100 North Senate Ave	Amount of Each Disbursement this Period 187.50
	City Indianapolis State IN Zip Code 46204	
	Purpose of Disbursement Payroll Taxes	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

-4418.02

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

26514.75

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non-Federal	M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 6	451.59

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		451.59	Transaction ID: T2012
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Indiana Democratic S	M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 6	3946.21

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		3946.21	Transaction ID: T389
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT
Indiana Democratic
S

DATE OF RECEIPT

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

11145.23

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

11145.23

Transaction ID: T390

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT
 Indiana Democratic
 S

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 2 / 2 8 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

22427.21

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

22427.21

Transaction ID: T391

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Indiana Democratic S	M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 6	1728.32

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		1728.32	Transaction ID: T392
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Indiana Democratic S	M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6	34000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	Transaction ID: T393	34000.00
ii) Generic Voter Drive	Transaction ID:	
iii) Exempt Activities	Transaction ID:	
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)	Transaction ID:	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Indiana Democratic S	M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	50000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	50000.00	Transaction ID: T395
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Indiana Democratic S	M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	4000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4000.00	Transaction ID: T396
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	127698.56
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	127698.56

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Mr. Michael D. Edmondson
Mailing Address
1530 E 81st St
City State Zip Code
Indianapolis IN 46240-2716
Purpose of Disbursement:
payroll
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date MM / DD / YYYY
11 / 30 / 2006
Transaction ID: D7963

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
545.21		2051.03		2596.24

B. Full Name (Last, First, Middle Initial)
Mr. Michael D. Edmondson
Mailing Address
1530 E 81st St
City State Zip Code
Indianapolis IN 46240-2716
Purpose of Disbursement:
payroll
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date MM / DD / YYYY
12 / 15 / 2006
Transaction ID: D7984

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
545.21		2051.03		2596.24

C. Full Name (Last, First, Middle Initial)
Mr. Michael D. Edmondson
Mailing Address
1530 E 81st St
City State Zip Code
Indianapolis IN 46240-2716
Purpose of Disbursement:
travel reimbursement
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date MM / DD / YYYY
12 / 22 / 2006
Transaction ID: D7999

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.59		62.41		79.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1107.01		4164.47		5271.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Mr. Michael D. Edmondson
Mailing Address
1530 E 81st St
City State Zip Code
Indianapolis IN 46240-2716
Purpose of Disbursement:
payroll
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 29 / 2006
Transaction ID: D8004

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
545.21		2051.03		2596.24

B. Full Name (Last, First, Middle Initial)
Sandler & Reiff
Mailing Address
50 E St SE Ste 300
City State Zip Code
Washington DC 20003-2620
Purpose of Disbursement:
retainer
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 22 / 2006
Transaction ID: D8001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
168.00		632.00		800.00

C. Full Name (Last, First, Middle Initial)
Anthem BCBS IN GROUP
Mailing Address
PO Box 105113
City State Zip Code
Atlanta GA 30348-5113
Purpose of Disbursement:
health insurance
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 04 / 2006
Transaction ID: D7972

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1304.41		2318.95		3623.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2017.62		5001.98		7019.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Anthem BCBS IN GROUP
Mailing Address
PO Box 105113
City Atlanta **State** GA **Zip Code** 30348-5113
Purpose of Disbursement:
health insurance
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 04 / 2006
Transaction ID: D7973

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1547.61		2751.30		4298.91

B. Full Name (Last, First, Middle Initial)
Anthem Life
Mailing Address
Department L-8111
City Columbus **State** OH **Zip Code** 43268-0001
Purpose of Disbursement:
life insurance
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 01 / 2006
Transaction ID: D7971

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
218.10		387.74		605.84

C. Full Name (Last, First, Middle Initial)
Anthem Life
Mailing Address
Department L-8111
City Columbus **State** OH **Zip Code** 43268-0001
Purpose of Disbursement:
insurance
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 22 / 2006
Transaction ID: D334583

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
93.45		351.55		445.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1859.16		3490.59		5349.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Skyline Club
Mailing Address
1 American Sq Fl 36
City State Zip Code
Indianapolis IN 46282
Purpose of Disbursement:
dues
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 22 / 2006
Transaction ID: D7991

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.93		165.26		209.19

B. Full Name (Last, First, Middle Initial)
Jewett Printing
Mailing Address
101 W Ohio St Ste 2000
City State Zip Code
Indianapolis IN 46204-4204
Purpose of Disbursement:
Void of stale check
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 31 / 2006
Transaction ID: D369973

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-34.95		-131.47		-166.42

C. Full Name (Last, First, Middle Initial)
Coca-Cola Indiana
Mailing Address
135 S La Salle St Dept 2329
City State Zip Code
Chicago IL 60674-2329
Purpose of Disbursement:
Machine refill
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 23 / 2006
Transaction ID: D365314

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.45		114.56		145.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.43		148.35		187.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Duke Realty Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 75 Remittance Dr Dept 3205			Allocated Activity or Event Year-To-Date 741967.05		
City Chicago	State IL	Zip Code 60675-3205	Date M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6		
Purpose of Disbursement: Rent			Transaction ID: D334573		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1709.54		6431.13		8140.67

B. Full Name (Last, First, Middle Initial) LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 2314			Allocated Activity or Event Year-To-Date 741967.05		
City Carol Stream	State IL	Zip Code 60132-0001	Date M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6		
Purpose of Disbursement: legal press			Transaction ID: D7996		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.25		414.75		525.00

C. Full Name (Last, First, Middle Initial) Mr. Daniel J Parker			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7458 Roosees Way			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46217-5484	Date M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6		
Purpose of Disbursement: payroll			Transaction ID: D7988		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
615.20		2314.34		2929.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2434.99		9160.22		11595.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mr. Daniel J Parker			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7458 Rooses Way			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46217-5484	Date M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6		
Purpose of Disbursement: payroll			Transaction ID: D8006		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
648.19		2438.43		3086.62

B. Full Name (Last, First, Middle Initial) SBC Global Services, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8102			Allocated Activity or Event Year-To-Date 741967.05		
City Aurora	State IL	Zip Code 60507-8102	Date M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 6		
Purpose of Disbursement: Telephones			Transaction ID: D365316		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.08		214.73		271.81

C. Full Name (Last, First, Middle Initial) SBC Global Services, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8102			Allocated Activity or Event Year-To-Date 741967.05		
City Aurora	State IL	Zip Code 60507-8102	Date M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 6		
Purpose of Disbursement: Telephones			Transaction ID: D365317		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
141.62		532.75		674.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
846.89		3185.91		4032.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Verizon North			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 920041			Allocated Activity or Event Year-To-Date 741967.05		
City Dallas	State TX	Zip Code 75392-0041	Date M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6		
Purpose of Disbursement: Void of stale check			Transaction ID: D369963		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-237.72		-894.26		-1131.98

B. Full Name (Last, First, Middle Initial) watt's blooming			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 615 Massachusetts Ave			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46204-1606	Date M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6		
Purpose of Disbursement: flowers			Transaction ID: D7998		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
445.20		1674.80		2120.00

C. Full Name (Last, First, Middle Initial) The Conference Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 254 Chapman Rd , Topkis Building S			Allocated Activity or Event Year-To-Date 741967.05		
City Newark	State DE	Zip Code 19702	Date M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6		
Purpose of Disbursement: conference calls			Transaction ID: D7992		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.38		148.14		187.52

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
246.86		928.68		1175.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) The Conference Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 254 Chapman Rd , Topkis Building S			Allocated Activity or Event Year-To-Date 741967.05		
City Newark	State DE	Zip Code 19702	Date MM / DD / YYYY 12 / 22 / 2006		
Purpose of Disbursement: conference calls			Transaction ID: D7997		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.31		53.82		68.13

B. Full Name (Last, First, Middle Initial) National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 W Washington St			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46204	Date MM / DD / YYYY 12 / 01 / 2006		
Purpose of Disbursement: credit card payment			Transaction ID: D7980		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1733.92		3082.53		4816.45

C. Full Name (Last, First, Middle Initial) Mrs. Kimberly N Bostic			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6864 W Philadelphia Dr			Allocated Activity or Event Year-To-Date 741967.05		
City Mc Cordsville	State IN	Zip Code 46055-9325	Date MM / DD / YYYY 11 / 30 / 2006		
Purpose of Disbursement: payroll			Transaction ID: D7961		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.46		1043.76		1321.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2025.69		4180.11		6205.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mrs. Kimberly N Bostic			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6864 W Philadelphia Dr			Allocated Activity or Event Year-To-Date 741967.05		
City Mc Cordsville	State IN	Zip Code 46055-9325	Date M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6		
Purpose of Disbursement: payroll			Transaction ID: D7983		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.46		1043.76		1321.22

B. Full Name (Last, First, Middle Initial) Mrs. Kimberly N Bostic			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6864 W Philadelphia Dr			Allocated Activity or Event Year-To-Date 741967.05		
City Mc Cordsville	State IN	Zip Code 46055-9325	Date M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6		
Purpose of Disbursement: payroll			Transaction ID: D8003		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.46		1043.76		1321.22

C. Full Name (Last, First, Middle Initial) Cingular Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10617 E Washington St			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46229-2611	Date M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 6		
Purpose of Disbursement: cell phones			Transaction ID: D7982		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
453.59		1706.38		2159.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1008.51		3793.90		4802.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Bucher & Christian Consulting, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10 W Market St Suite 300			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: computer			Transaction ID: D8002		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
498.33		1874.67		2373.00

B. Full Name (Last, First, Middle Initial) Party Pleasures			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 310 Main St			Allocated Activity or Event Year-To-Date .00		
City Hobart	State IN	Zip Code 46342-4442	Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Void of stale check			Transaction ID: D369969		
Activity or Event Identifier:					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-58.96		-176.89		-235.85

C. Full Name (Last, First, Middle Initial) Anthem-COBRA			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address L-2099			Allocated Activity or Event Year-To-Date 741967.05		
City Columbus	State OH	Zip Code 43260-0001	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: cobra			Transaction ID: D7970		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.00		32.00		50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
457.37		1729.78		2187.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
AT & T
Mailing Address
PO Box 660011
City State Zip Code
Dallas TX 75266-0011
Purpose of Disbursement:
phones
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 22 / 2006
Transaction ID: D7995

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
220.43		829.23		1049.66

B. Full Name (Last, First, Middle Initial)
SBC Internet Services
Mailing Address
PO Box 650396
City State Zip Code
Dallas TX 75265-0396
Purpose of Disbursement:
phones
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 01 / 2006
Transaction ID: D7976

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
208.57		370.80		579.37

C. Full Name (Last, First, Middle Initial)
AT&T Capital Services
Mailing Address
13160 Collection Center Dr
City State Zip Code
Chicago IL 60693-0131
Purpose of Disbursement:
Phones
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 22 / 2006
Transaction ID: D334581

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.76		427.95		541.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
542.76		1627.98		2170.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Kelly N Norton			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5547 N Winthrop Unit B			Allocated Activity or Event Year-To-Date 741967.05	
City Indianapolis	State IN	Zip Code 46220-1944	Category/ Type	
Purpose of Disbursement: payroll				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
			Transaction ID: D7966	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.49		626.32		792.81

B. Full Name (Last, First, Middle Initial) Kelly N Norton			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5547 N Winthrop Unit B			Allocated Activity or Event Year-To-Date 741967.05	
City Indianapolis	State IN	Zip Code 46220-1944	Category/ Type	
Purpose of Disbursement: payroll				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	
			Transaction ID: D7987	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.49		626.32		792.81

C. Full Name (Last, First, Middle Initial) Kelly N Norton			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5547 N Winthrop Unit B			Allocated Activity or Event Year-To-Date 741967.05	
City Indianapolis	State IN	Zip Code 46220-1944	Category/ Type	
Purpose of Disbursement: payroll				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 6	
			Transaction ID: D8007	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.49		626.32		792.81

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
499.47		1878.96		2378.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Hulman & Co.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 900 Wabash Ave			Allocated Activity or Event Year-To-Date 741967.05		
City	State	Zip Code	Category/ Type		
Terre Haute	IN	47807-3208			
Purpose of Disbursement: Void of Stale check			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Activity or Event Identifier: Administrative			Transaction ID: D369962		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-506.53		-1905.51		-2412.04

B. Full Name (Last, First, Middle Initial) Princeton Mining Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 3088			Allocated Activity or Event Year-To-Date 741967.05		
City	State	Zip Code	Category/ Type		
Terre Haute	IN	47803-0088			
Purpose of Disbursement: utilities			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Activity or Event Identifier: Administrative			Transaction ID: D7911		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.05		477.94		604.99

C. Full Name (Last, First, Middle Initial) Ms. Jennifer D Weiser			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1128 E 56th St			Allocated Activity or Event Year-To-Date 741967.05		
City	State	Zip Code	Category/ Type		
Indianapolis	IN	46220-3222			
Purpose of Disbursement: payroll			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Activity or Event Identifier: Administrative			Transaction ID: D7985		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.88		1357.62		1718.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-18.60		-69.95		-88.55

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Ms. Jennifer D Weiser			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1128 E 56th St			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46220-3222	Date <input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: payroll			Transaction ID: D8005		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.88		1357.62		1718.50

B. Full Name (Last, First, Middle Initial) DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1200 S Pine Island Rd			Allocated Activity or Event Year-To-Date 741967.05		
City Plantation	State FL	Zip Code 33324	Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Shipping			Transaction ID: D365313		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.78		93.23		118.01

C. Full Name (Last, First, Middle Initial) DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1200 S Pine Island Rd			Allocated Activity or Event Year-To-Date 741967.05		
City Plantation	State FL	Zip Code 33324	Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: void of stale check			Transaction ID: D369979		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-27.96		-105.17		-133.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
357.70		1345.68		1703.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1200 S Pine Island Rd			Allocated Activity or Event Year-To-Date 741967.05	
City	State	Zip Code	Category/ Type	
Plantation	FL	33324		
Purpose of Disbursement: delivery service			Date M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D7977	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
259.14		460.69		719.83

B. Full Name (Last, First, Middle Initial) DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1200 S Pine Island Rd			Allocated Activity or Event Year-To-Date 741967.05	
City	State	Zip Code	Category/ Type	
Plantation	FL	33324		
Purpose of Disbursement: delivery service			Date M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6	
Activity or Event Identifier: Administrative			Transaction ID: D7978	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
146.70		260.80		407.50

C. Full Name (Last, First, Middle Initial) Indiana Black Expo, Inc			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3145 North Meridian St			Allocated Activity or Event Year-To-Date .00	
City	State	Zip Code	Category/ Type	
Indianapolis	IN	46208		
Purpose of Disbursement: Void of stale check			Date M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Activity or Event Identifier:			Transaction ID: D369967	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-187.50		-562.50		-750.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
218.34		158.99		377.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Malden Express, LLC

Mailing Address
2021 E 52nd St Ste 101

City	State	Zip Code
Indianapolis	IN	46205

Purpose of Disbursement:
office supplies

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
741967.05

Date 12 / 22 / 2006
Transaction ID: D7989

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.71		348.75		441.46

B. Full Name (Last, First, Middle Initial)
Malden Express, LLC

Mailing Address
2021 E 52nd St Ste 101

City	State	Zip Code
Indianapolis	IN	46205

Purpose of Disbursement:
supplies

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
741967.05

Date 12 / 22 / 2006
Transaction ID: D8000

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.66		480.24		607.90

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

Mailing Address
9382 Priority Way West Dr

City	State	Zip Code
Indianapolis	IN	46240

Purpose of Disbursement:
payroll service

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
741967.05

Date 12 / 01 / 2006
Transaction ID: D7974

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.94		142.11		222.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
300.31		971.10		1271.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Mark A. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 402 N Meridian St Apt 208			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: payroll			Transaction ID: D7965		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="211.23"/>		<input type="text" value="794.65"/>		<input type="text" value="1005.88"/>

B. Full Name (Last, First, Middle Initial) Mark A. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 402 N Meridian St Apt 208			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: payroll			Transaction ID: D7986		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="211.23"/>		<input type="text" value="794.65"/>		<input type="text" value="1005.88"/>

C. Full Name (Last, First, Middle Initial) Mark A. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 402 N Meridian St Apt 208			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: payroll			Transaction ID: D8008		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="362.12"/>		<input type="text" value="643.76"/>		<input type="text" value="1005.88"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="784.58"/>		<input type="text" value="2233.06"/>		<input type="text" value="3017.64"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
National City

Mailing Address
101 W Washington St

City	State	Zip Code	Category/ Type
Indianapolis	IN	46204	

Purpose of Disbursement:
credit card payment

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
741967.05

Date / /
Transaction ID: D7979

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
530.66		943.39		1474.05

B. Full Name (Last, First, Middle Initial)
Marriott Hotels

Mailing Address
350 W Maryland St

City	State	Zip Code	Category/ Type
Indianapolis	IN	46225-1051	

Purpose of Disbursement:
lodging/travel

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
741967.05

Date / /
Transaction ID: D8025

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.31		35.00		44.31

C. Full Name (Last, First, Middle Initial)
Marriott Hotels

Mailing Address
350 W Maryland St

City	State	Zip Code	Category/ Type
Indianapolis	IN	46225-1051	

Purpose of Disbursement:
lodging

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
741967.05

Date / /
Transaction ID: D8030

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.90		150.08		189.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
530.66		943.39		1474.05

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5206 W 38th St			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46254-2915	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: office expenses			Transaction ID: D8016		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.69		51.49		65.18

B. Full Name (Last, First, Middle Initial) Meijer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5349 Pike Plaza Road			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46254	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: travel			Transaction ID: D8022		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.89		22.15		28.04

C. Full Name (Last, First, Middle Initial) Westin Hotel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 S Capitol Ave			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46204-3406	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: food expense			Transaction ID: D8020		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.30		57.56		72.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Westin Hotel

Mailing Address
50 S Capitol Ave

City State Zip Code
Indianapolis IN 46204-3406

Purpose of Disbursement:
employee dinner

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

741967.05

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 12 / 01 / 2006

Transaction ID: D8029

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
96.29		362.22		458.51

B. Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address
8924 E 116th

City State Zip Code
Fishers IN 46038

Purpose of Disbursement:
travel

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

741967.05

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 12 / 01 / 2006

Transaction ID: D8021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.67		21.33		27.00

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

Mailing Address
1850 E 151st St

City State Zip Code
Carmel IN 46033-7732

Purpose of Disbursement:
travel

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

741967.05

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 12 / 01 / 2006

Transaction ID: D8014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.92		22.25		28.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Amoco			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1850 E 151st St			Allocated Activity or Event Year-To-Date 741967.05		
City Carmel	State IN	Zip Code 46033-7732	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: travel			Transaction ID: D8023		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6.72"/>		<input type="text" value="25.29"/>		<input type="text" value="32.01"/>

B. Full Name (Last, First, Middle Initial) Amoco			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1850 E 151st St			Allocated Activity or Event Year-To-Date 741967.05		
City Carmel	State IN	Zip Code 46033-7732	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: travel			Transaction ID: D8026		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.10"/>		<input type="text" value="26.71"/>		<input type="text" value="33.81"/>

C. Full Name (Last, First, Middle Initial) Amoco			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1850 E 151st St			Allocated Activity or Event Year-To-Date 741967.05		
City Carmel	State IN	Zip Code 46033-7732	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: gas			Transaction ID: D8028		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.67"/>		<input type="text" value="28.87"/>		<input type="text" value="36.54"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Circle S # 40			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1860 S Ohio St			Allocated Activity or Event Year-To-Date 741967.05		
City Martinsville	State IN	Zip Code 46151-3320	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: travel			Transaction ID: D8017		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.90		22.21		28.11

B. Full Name (Last, First, Middle Initial) Circle S # 40			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1860 S Ohio St			Allocated Activity or Event Year-To-Date 741967.05		
City Martinsville	State IN	Zip Code 46151-3320	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: travel			Transaction ID: D8018		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.68		21.38		27.06

C. Full Name (Last, First, Middle Initial) motormart			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8401 N Kentucky Ave			Allocated Activity or Event Year-To-Date 741967.05		
City Evansville	State IN	Zip Code 47725	Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: travel			Transaction ID: D8015		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.97		22.48		28.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
MacNivens
Mailing Address
339 Massachusetts Ave
City Indianapolis **State** IN **Zip Code** 46204-2108
Purpose of Disbursement:
office expense
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 01 / 2006
Transaction ID: D8019

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.92		123.86		156.78

B. Full Name (Last, First, Middle Initial)
marathon oil
Mailing Address
1304 Olin Ave
City Indianapolis **State** IN **Zip Code** 46222-3294
Purpose of Disbursement:
travel
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 01 / 2006
Transaction ID: D8024

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.87		22.06		27.93

C. Full Name (Last, First, Middle Initial)
Galt House Hotel
Mailing Address
140 N Fourth St
City Louisville **State** KY **Zip Code** 40202
Purpose of Disbursement:
lodging
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
741967.05
Date 12 / 01 / 2006
Transaction ID: D8027

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.76		149.55		189.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 W Washington St			Allocated Activity or Event Year-To-Date 741967.05		
City	State	Zip Code	Category/ Type		
Indianapolis	IN	46204			
Purpose of Disbursement: Credit Card Payment			Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Administrative			Transaction ID: D8123		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
167.14		429.80		596.94

B. Full Name (Last, First, Middle Initial) Phoneix Park Hotel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 520 N Capitol St NW			Allocated Activity or Event Year-To-Date 741967.05		
City	State	Zip Code	Category/ Type		
Washington	DC	20001-1510			
Purpose of Disbursement: Hotel Expenses			Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D8207		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
167.14		429.80		596.94

C. Full Name (Last, First, Middle Initial) National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 W Washington St			Allocated Activity or Event Year-To-Date 741967.05		
City	State	Zip Code	Category/ Type		
Indianapolis	IN	46204			
Purpose of Disbursement: credit card payment			Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Administrative			Transaction ID: D8124		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
229.17		589.28		818.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
396.31		1019.08		1415.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Four Seasons Mailing Address 7680 Granite Loop Rd City State Zip Code Teton Village WY 83025 Purpose of Disbursement: Travel Expenses Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/> Transaction ID: D8208
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="89.02"/>		<input type="text" value="228.91"/>		<input type="text" value="317.93"/>

B. Full Name (Last, First, Middle Initial) Four Seasons Mailing Address 7680 Granite Loop Rd City State Zip Code Teton Village WY 83025 Purpose of Disbursement: Food Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/> Transaction ID: D8209
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.71"/>		<input type="text" value="19.83"/>		<input type="text" value="27.54"/>

C. Full Name (Last, First, Middle Initial) Claddaugh Irish Pub Mailing Address 234 S Meridian St City State Zip Code Indianapolis IN 46225-1032 Purpose of Disbursement: Food Expense Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/> Transaction ID: D8210
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="15.00"/>		<input type="text" value="38.58"/>		<input type="text" value="53.58"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
Union League Club

Mailing Address

65 W Jackson Blvd

City State Zip Code
Chicago IL 60604-3507

Purpose of Disbursement:
Food/Travel Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

741967.05

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 12 / 23 / 2006

Transaction ID: D8211

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
6.83 + 17.55 = 24.38

B. Full Name (Last, First, Middle Initial)
Union League Club

Mailing Address

65 W Jackson Blvd

City State Zip Code
Chicago IL 60604-3507

Purpose of Disbursement:
Food/Travel Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

741967.05

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 12 / 23 / 2006

Transaction ID: D8213

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
40.61 + 104.41 = 145.02

C. Full Name (Last, First, Middle Initial)
Uno Chicago Grille

Mailing Address

50 Massachusetts Ave

City State Zip Code
Washington DC 20002

Purpose of Disbursement:
Food/Travel Expenses

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

741967.05

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 12 / 23 / 2006

Transaction ID: D8212

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
6.83 + 17.55 = 24.38

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.00 + 0.00 = 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial)
All Trans Inc.

Mailing Address
PO Box 96

City	State	Zip Code
Jackson	WY	83001-0096

Purpose of Disbursement:
Bus Transportation/Travel Expense

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
741967.05

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	6

Transaction ID: D8220

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.47		32.05		44.52

B. Full Name (Last, First, Middle Initial)
National City

Mailing Address
101 W Washington St

City	State	Zip Code
Indianapolis	IN	46204

Purpose of Disbursement:
credit card payment

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
741967.05

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	6

Transaction ID: D8125

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.91		161.76		224.67

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

Mailing Address
1300 E 86th St

City	State	Zip Code
Indianapolis	IN	46240

Purpose of Disbursement:
Decorations for Holiday Reception

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
741967.05

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	6

Transaction ID: D8221

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.58		60.62		84.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.91		161.76		224.67

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) Hobby Lobby			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2206 E 116th St			Allocated Activity or Event Year-To-Date 741967.05		
City Carmel	State IN	Zip Code 46032-3215	Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Decorations for Holiday Reception			Transaction ID: D8222		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.88		22.85		31.73

B. Full Name (Last, First, Middle Initial) Walmart			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8300 E 96th St			Allocated Activity or Event Year-To-Date 741967.05		
City Fishers	State IN	Zip Code 46037-9795	Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Decorations for Holiday Reception			Transaction ID: D8223		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.45		78.29		108.74

C. Full Name (Last, First, Middle Initial) National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 W Washington St			Allocated Activity or Event Year-To-Date 741967.05		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: credit card payment			Transaction ID: D8126		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.99		97.78		123.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.99		97.78		123.77

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Indiana Democratic Congressional Victory Committee

A. Full Name (Last, First, Middle Initial) BP Oil			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1850 E 151st St			Allocated Activity or Event Year-To-Date 741967.05		
City Carmel	State IN	Zip Code 46033-7732	Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Gas for Travel			Transaction ID: D8675		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.81		35.52		49.33

B. Full Name (Last, First, Middle Initial) Circle S # 40			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1860 S Ohio St			Allocated Activity or Event Year-To-Date 741967.05		
City Martinsville	State IN	Zip Code 46151-3320	Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Gas for Travel			Transaction ID: D8676		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.96		35.89		49.85

C. Full Name (Last, First, Middle Initial) Sunoco SVC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 300 E Tipton St			Allocated Activity or Event Year-To-Date 741967.05		
City Seymour	State IN	Zip Code 47274-3514	Date <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Gas for Travel			Transaction ID: D8674		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.89		17.70		24.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
15743.96	46151.82	61895.78