|   | EPORT OF RECE<br>ND DISBURSEM<br>Other Than An Authorized C  | ENTS   | RECEIVED<br>FECTIONIC CENTER<br>2009 JAM 1.6 PM 3: 57<br>Office Use Only  |
|---|--|--|---|
| 1. NAME OF TY<br>COMMITTEE (in full)  |  |  | FE4M5   |
| ADDRESS (number and street) Check if different<br>than previously<br>reported. (ACC) CHECK IDENTIFICATION NUMBER  | INDIANAPOLIS   |  | PCTION<br>REET, STE 8508.   |
| c 0040559   | . IS THIS<br>REPORT  |  | AMENDED<br>(A)  |
| 4. TYPE OF REPORT<br>(Choose One)<br>(a) Quarterly Reports:<br>April 15<br>Quarterly Report (Q1)<br>July 15<br>Quarterly Report (Q2)<br>October 15<br>Quarterly Report (Q3)<br>January 31<br>Year-End Report (YE)<br>July 31 Mid-Year<br>Report (Non-election<br>Year Only) (MY)<br>Termination Report<br>(TER) | PRE-Election<br>Report for the: Co<br>Election on<br>(d) 30-Day<br>POST-Election<br>Report for the:<br>Election on | Jun 20 (M6)         Jul 20 (M7)         mary (12P)         nvention (12C)         Market /         Darie /         neral (30G) | Aug 20 (M8)       Nov 20 (M11)<br>(Non-Election<br>Year Only)         Sep 20 (M9)       Dec 20 (M12)<br>(Non-Election<br>Year Only)         Oct 20 (M10)       Jan 31 (YE)         General (12G)       Runoff (12R)         Special (12S)       in the<br>State of         Runoff (30R)       Special (30S)         in the<br>State of       In the |
|   | Peport and to the best of my knowle<br>Darla Barnet  | - F  | B1° / Z008  |
| Signature of Treasurer  | Jark Darrett   | - Date   | 07 08 2009  |
| NOTE: Submission of false, erroneou<br>Office<br>Use<br>Only  | s, or incomplete information may subje   | ct the person signing this Re  | FEC FORM 3X<br>Rev. 12/2004   |

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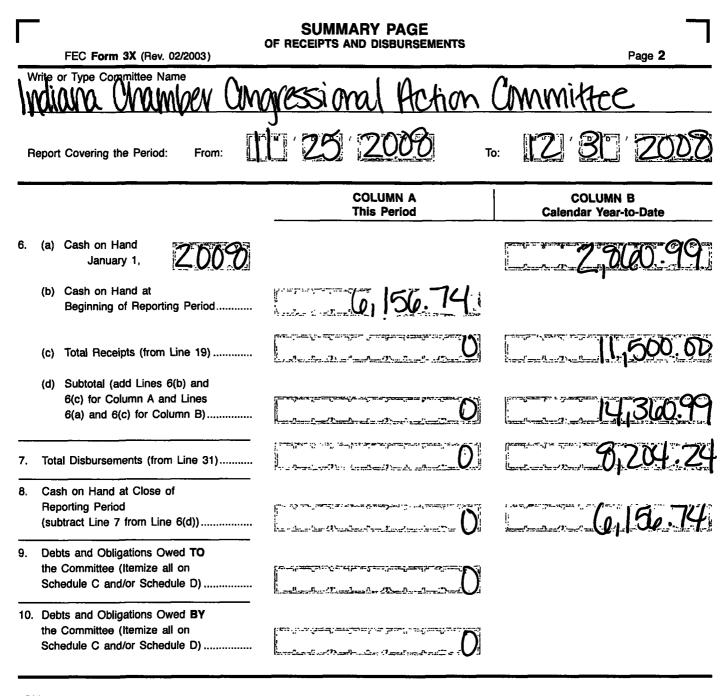
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FE6AN026

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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

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Nn

| FEC Form 3X (Rev. 06/2004)   | DETAILED SUMMARY PAGE<br>of Receipts | Page 3                            |
|--|--------------------------------------|-----------------------------------|
| Write or Type Committee Name   | er Congressional Act                 | ion Committee                     |
| Report Covering the Period: From   | 11 25 2000                           | TO: [Z 3] 2000                    |
| I. Receipts  | COLUMN A<br>Total This Period        | COLUMN B<br>Calendar Year-to-Date |
| <ol> <li>Contributions (other than loans) Frce         <ul> <li>Individuals/Persons Other<br/>Than Political Committees                 <ul></ul></li></ul></li></ol>  | <ul> <li>in Funds</li> </ul>         |                                   |
| <ul> <li>(c) Total Transfers (add 18(a) and 19.</li> <li>19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).</li> <li>20. Total Federal Receipts (subtract Line 18(c) from Line 19).</li> </ul> |                                      | 11,500.00                         |
|  |                                      | •                                 |

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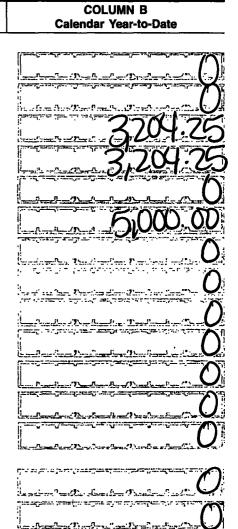
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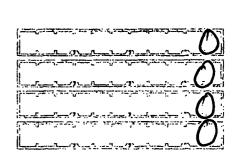
#### **DETAILED SUMMARY PAGE**

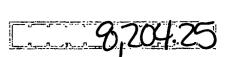
of Disbursements

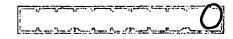
Page 4

|     | FEC Form 3X (Rev. 02/2003)   | or Dispursements   |
|-----|--|--|
|     | II. Disbursements  | COLUMN A   |
| 21. | Operating Expenditures:<br>(a) Allocated Federal/Non-Federal                             | Total This Period  |
|     | Activity (from Schedule H4)<br>(i) Federal Share   | and the deside of the deside   |
|     | (ii) Non-Federal Share   | م الم الم الم الم الم الم الم الم الم ال   |
|     | (b) Other Federal Operating<br>Expenditures  | ار این میکند.<br>میکندید که میکند میکند به مطلب اینکند میکند اینکند اینکند میکند<br>میکند بینک هوی میکند این اینکند ای  |
|     | (c) Total Operating Expenditures   | a and and with the star starting and and a starting and a starting and a starting at the start |
| 22. | (add 21(a)(i), (a)(ii), and (b)) ►<br>Transfers to Affiliated/Other Party                | and the second of the second se  |
| 23. | Committees<br>Contributions to   | بر « <u>مساليم</u> «و <u>مساليم»، «ما موم</u> ر».<br>من مدين يستمين ماريم من من من درين ماريم من من مريم و   |
| ~ - | Federal Candidates/Committees<br>and Other Political Committees                          |  |
| 24. | Independent Expenditures<br>(use Schedule E)   | 1:<br>t,   |
| 25. | Coordinated Party Expenditures<br>(2 U.S.C. §441a(d))                                    | lander and the section of the sectio |
|     | (use Schedule F)   | l an Sameleo al les Sans le critiques de contra<br>presentantes partes partes<br>partes partes   |
| 26. | Loan Repayments Made   | l<br>- Service and the structure of the second second<br>- Second secon   |
|     | Loans Made<br>Refunds of Contributions To:   | از<br>الهوريانية بالهرجانية بالمورية المراجعية المراجع عن المراجع المراجعية المراجع المراجعية المراجع المراجع المراجع<br>موضية المراجع ا   |
|     | (a) Individuals/Persons Other<br>Than Political Committees                               | La la Carla Martin Martin  |
|     | (b) Political Party Committees   |  |
|     | (c) Other Political Committees   | i i se d'a reclience d'a se d'a s<br>e se   |
|     | (such as PACs)   | le areatantices a directo alconte  |
|     | (d) Total Contribution Refunds   | در . د. با مس <del>رکی ور در گر</del> ی بار <del>کی در گری در است.</del><br>مرا . د. با مسر <del>کی مرکز در در گر</del> ی بارکی محکظ   |
|     | (add Lines 28(a), (b), and (c))▶   | alisti a serie a subsection a subsection of a s<br>A subsection of a subsection of   |
| 29. | Other Disbursements  |  |
| 30. | Federal Election Activity (2 U.S.C. §431(20))<br>(a) Allocated Federal Election Activity | )  |
|     | (in Schedule H6)   | سی محکامت محکومیک سا اسان میکسید <sup>5</sup>  |
|     | (i) Federal Share  | l<br>Lander and the second second<br>Second second   |
|     | (ii) "Levin" Share   | المعلم ما محمد المحمد بعد المحمد ا<br>المحمد المحمد   |
|     | (b) Federal Election Activity Paid Entirely<br>With Federal Funds                        |  |
|     | (c) Total Federal Election Activity (add   | ער איז   |
|     | Lines 30(a)(i), 30(a)(ii) and 30(b))▶  | <u></u>  |
| 31. | Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29, and 30(c))      | مى، مى كەنتىر مەرمىي مەرمەر مەرمەر مەرمەر مەرمەر<br>!!   |
| _   |  | [<br>[]  |
| 32. | Total Federal Disbursements  |  |
|     |  | ر.<br>دىرامىمىلەر بىر <del>الىيىنى</del> ا <del>مىرىكىتىكى ي</del> ورىغ بىيەر خاندىدەن.  |
|     | Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))       |  |



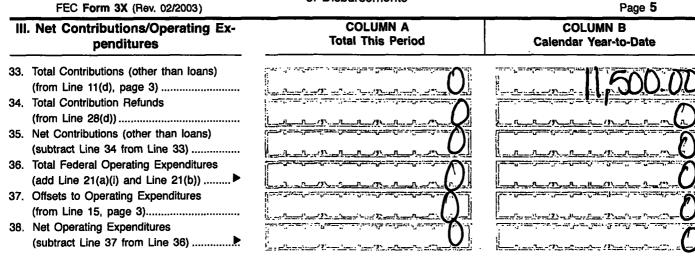






#### DETAILED SUMMARY PAGE

of Disbursements



| 64                     |   |   |  |   |
|------------------------|---|---|--|---|
| 3                      | CHEDULE A (FEC Form 3X)                                       |   | Use separate schedule(s)   | FOR LINE NUMBER: PAGE OF  |
| IT                     | EMIZED RECEIPTS   |   | for each category of the   | (check only one)  |
|                        |   |   | Detailed Summary Page  | 11a 11b 11c 12  |
|                        | · · · · · · · · · · · · · · · · · · ·                         |   | , ,  | 13 14 15 16 17  |
| A                      | ny information copied from such Reports and S                 | tatements m   | ay not be sold or used by any pe   | erson for the purpose of soliciting contributions   |
| or                     | for commercial purposes, other than using the                 | name and a  | address of any political committee   | to solicit contributions from such committee.   |
| $\setminus$            | NAME OF COMMITTEE (In Full)                                   | ^   | <u> </u>   | <u>^</u>  |
| $\left  \right\rangle$ | ladiana (hain logy  | $(\lambda )$  | USCION NOL   | ion (Immittee   |
| V                      |   |   | VESSIONAL HUT  |   |
| Ľ                      | Full Name (Last, First, Middle Initial)                       | <u> </u>  |  |   |
| A.                     |   |   |  | Date of Receipt   |
|                        | Mailing Address   |   |  |   |
|                        |   |   |  | Market / P.O.O.P. / P.O.A.A.A.C.A.  |
|                        | City  | State   | Zip Code   | - Barrathand Same Instational Constant  |
|                        | 0.19  | Olaio   |  |   |
|                        |   |   |  | Amount of Each Receipt this Period  |
|                        | FEC ID number of contributing                                 |   | an a   | รัฐมาระสาราวัตร เก <u>รสรรฐานสีวิทยาสร</u> ิตร ตรีตรรษที่สุขารเพื่องระจริง เประจ<br>ในการที่จะการกับการสร้างสารที่สาวารสรรรษที่สาวารที่สาวารที่สาวารที่สาวารที่สาวารที่สาวารที่สาวารที่สาวารที่สาว  |
|                        | federal political committee.                                  | Landerswine   | we have been and the second second   | E   |
|                        | Name of Employer  | Occupation  |  |   |
|                        |   |   | •  |   |
|                        | Descipt Far   | L   |  | 4   |
|                        | Receipt For:  |   | Year-to-Date ▼   | 1   |
|                        | Primary General   | 1994 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -   | and and a second start of a second  |   |
|                        | Other (specify)   | ji<br>Tana Seria Satu   | این مراجعه کارمیسکوسی با زیر و 10م در کردند مراجع میگر کو  |   |
| _                      |   |   |  |   |
|                        | Full Name (Last, First, Middle Initial)                       |   |  |   |
| Β.                     |   |   |  | Date of Receipt   |
|                        | Mailing Address   |   |  | <u>רייזייזיאין אוראין אוראין אוראין אוראיי</u> אין  |
|                        |   |   |  |   |
|                        | City  | State   | Zip Code   |   |
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|                        | federal political committee.                                  | C   | a rea a a r  | Brownlow 192 - Acordina (1) willing for a fill part of any  |
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|                        | Name of Employer  | Occupation  | }  |   |
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|                        | Primary General   | gran gene gra   | والدار والصالى بالدور التشوي المتصورات الموضعات والمعورات  |   |
|                        | Other (specify)   |   | Summer Burthand - Burk   |   |
|                        |   | there is a constance  | 19 mainten konditionen konstitueren av 199 miliken och   |   |
|                        | Full Name (Last, First, Middle Initial)                       |   |  |   |
| C.                     |   |   |  | Date of Receipt   |
|                        | Mailing Address   |   |  | Later (   |
|                        | •   |   |  |   |
|                        | City  | State   | Zip Code   | in the first the second franches the first  |
|                        |   |   |  | Amount of Each Receipt this Period  |
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|                        | FEC ID number of contributing<br>federal political committee. | C   |  |   |
|                        | iouerar political committee.                                  | C. <del></del> ≧  | ni Caratan Caratan ang Kabupatén sa Kabupatén sa Kabupatén Sang Kabupatén Sang Kabupatén Sang Kabupatén S  | and mark and an in the shear of the shear of the state of the section as  |
|                        | Name of Employer  | Occupation  | · · · · · · · · · · · · · · · · · · ·  | 7   |
|                        |   |   |  |   |
|                        | Receipt For:  |   | Year-to-Date ▼   | 1   |
|                        | Primary General   |   | roan-ro-nare ▲   |   |
|                        | Other (specify)   | 3   |  |   |
|                        |   | he barber   | Marales a Case Observation from Colors From  |   |
|                        |   |   |  |   |
|                        | UDTOTAL of Descints This Pass (antion "                       |   |  | a<br>Learning an  |
| S                      | UBTOTAL of Receipts This Page (optional)                      |   | ••••••••••••••••••••••••••••••••••••••   | makers hours The Land Sweet Woodler she al Dankam   |
|                        | OTAL This Dariad flast same this first sure t                 | anha  |  | ال <del>محماليسية</del> المنقالية بالمنام المن ما كن ما الكم مراجع الما متراهيسياً.<br>المحماليسية  |
| ľ                      | OTAL This Period (last page this line number of               | oniy)   | •••••••  | in the set of the set |

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| S            | CHEDULE B (FEC Form 3X)                            | ······  |  |   | PAGE OF   |
|--------------|--|---|--|---|---|
|              | EMIZED DISBURSEMENTS                               | Use separate schedule(s                           | ;) FOR LINE<br>(check only   |   |   |
|              |  | for each category of the<br>Detailed Summary Page | 21h  | 22 23   | 24 25 26  |
| _            |  |   | 27   | 28a 28b   | 28c 29 30b  |
|              | ny information copied from such Reports and Staten |   |  |   |   |
| or           | for commercial purposes, other than using the name | he and address of any politi                      | ical committee to  | solicit contributions   | from such committee.  |
| $\mathbb{N}$ | NAME OF COMMITTEE (In Full)                        |   | $\Lambda$  |   |   |
| V            | MAIANA ( MAMBER ()                                 | matession   | al Hry   |   | MMHAR   |
|              | Full Name (Last, First, Middle Initial)            | <u>y</u>  |  |   | циппе   |
| A.           |  | -   |  | Date of Disburse  | ment  |
|              |  |   |  | FWVN7 / 10V   | <u> </u>  |
|              | Mailing Address                                    |   |  | and and brief   |   |
|              | City   | State Zip Code                                    |  |   |   |
|              | City   |   |  |   |   |
|              | Purpose of Disbursement                            |   | Succession and the second s  |   |   |
|              |  |   |  |   | Disbursement this Period  |
|              | Candidate Name                                     |   | Category/  |   | אין איז אין   |
|              | Office Sought: House Disbursen                     | ment For  | Туре   | in and some " and some in   | en de la sector de la tradição de la sector de   |
|              |  | Primary General                                   |  |   |   |
|              | President  | Other (specify) ▼                                 |  |   |   |
|              | State: District:                                   |   |  |   |   |
|              | Full Name (Last, First, Middle Initial)            |   |  |   |   |
| Β.           |  |   |  | Date of Disburse  | ment  |
|              |  |   |  | M TW A , D'T  | D   |
|              | Mailing Address                                    |   |  | laniard las   | and constant in the   |
|              | City   | State Zip Code                                    |  |   |   |
|              | ,  |   |  |   |   |
|              | Purpose of Disbursement                            |   | تندم شعد حشر معتا  |   |   |
|              | Candidate Name                                     |   | Level and the second   | Amount of Each Disbursement this Period   |   |
|              | Candidate Name                                     |   |  |   |   |
|              | Office Sought: House Disbursen                     | nent For:   | Турө   | the manifester of the C. Second S. Second S.  | rausines) in discussion de la constitución de la constitución de la constitución de la constitución de la const   |
|              | Senate   | Primary General                                   |  |   |   |
|              | President  | Other (specify)                                   |  |   |   |
|              | State: District:                                   | <u></u>   |  |   |   |
| ~            | Full Name (Last, First, Middle Initial)            |   |  | Data of Dishuma   |   |
| C.           |  |   |  | Date of Disburse  |   |
|              | Mailing Address                                    |   |  |   |   |
|              |  |   |  | Reaction in the   | ารรณ์ ปังกระวิทยารมีครามมีเทศที่<br>  |
|              | City   | State Zip Code                                    |  |   |   |
|              | Purpose of Disbursement                            |   |  |   |   |
|              |  |   | and the second s | Amount of Each  | Disbursement this Period  |
|              | Candidate Name                                     |   | Category/  |   | ner in the second s<br>Second second |
|              |  |   | Туре   | 1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1                       | and and have been been the set  |
|              | Office Sought: House Disbursen                     | ·   |  |   | andar an an a' an a' an a' an   |
|              |  | Primary General                                   |  |   |   |
|              | State: District:                                   | Other (specify)                                   |  |   |   |
|              |  |   |  |   | المرسية بدرانين وروار ومعالية والمراجع  |
| 9            | UBTOTAL of Disbursements This Page (optional)      |   |  |   |   |
| F            |  |   | <b>P</b>   | alarati Barata Barata Santa Santa<br>Barata Barata Barata Santa Santa Santa Santa Santa Santa Santa Santa Santa S | กมา ใหมา 92 เหมือนหลังสมให้เหมา ให้เราหนี<br>เหมา (หมายน ต. กรุงสมบัตรกับ (หมาย สามาร์  |
| Т            | OTAL This Period (last page this line number only) |   | ••••••   |   | a manager and an a star and   |
|              |  |   |  |   |   |

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# SCHEDULE C (FEC Form 3X) LOANS

| LOANS  | Use separate schedule(s) PAGE OF<br>for each category of the<br>Detailed Summary Page FOR LINE 13 OF FORM 3X      |  |  |
|--|---|--|--|
| NAME OF COMMITTEENIN Full)<br>WAI ANA CHANDER CINAVESSION  | nal Action Committee  |  |  |
| LOAN SOURCE Full Name (Last, First, Middle Initia)<br>Mailing Address  | Election:<br>Primary<br>General<br>Other (specify)  |  |  |
|  |   |  |  |
| City State ZIP Cod<br>Original Amount of Loan Cumulative Payment To  |   |  |  |
|  | المست <del>كنية بالمسالحة بين المراجع بدكة بعالية معركية الم</del> الية المستكمية المستكمية المراكمية المراجع الم |  |  |
| Date Incurred     Date Due       Image: State St | Interest Rate Secured:  |  |  |
| List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)  | Name of Employer  |  |  |
|  |   |  |  |
| Mailing Address  | Occupation  |  |  |
| City State ZIP Code  | Amount<br>Guaranteed  |  |  |
| 2. Full Name (Last, First, Middle Initial)   | Name of Employer  |  |  |
| Mailing Address  | Occupation  |  |  |
| City State ZIP Code  | Amount<br>Guaranteed<br>Outstanding:  |  |  |
| 3. Full Name (Last, First, Middle Initial)   | Name of Employer  |  |  |
| Mailing Address  | Occupation  |  |  |
| City State ZIP Code  | Amount Guaranteed June 2000 Constanting:  |  |  |
| 4. Full Name (Last, First, Middle Initial)   | Name of Employer  |  |  |
| Mailing Address  | Occupation  |  |  |
| City State ZIP Code  | Amount<br>Guaranteed<br>Outstanding:  |  |  |
| SUBTOTALS This Period This Page (optional)   |   |  |  |
| TOTALS This Period (last page in this line only)   |   |  |  |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If r  | no Schedule D, carry forward to appropriate line of Summary.  |  |  |

# SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page

of Schedule C

Federal Election Commission, Washington, D.C. 20463

| NAM   | IE OF COMMITTEE (In Full)  |   | FEC   | IDENTIFICATION NUMBER  |  |
|-------|--|---|---|--|--|
| W     | tiona (Mamber Cingressiona   | 1 Action Committee  | r IC  | 0040559.7  |  |
| -     | DING INSTITUTION (LENDER) J  | Amount of Loan  |   | Interest Rate (APR)  |  |
| Fuir  |  | an a granduna sharada ya a granduna granda ya a grandu<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1 | H,  | <u> </u>   |  |
| Maili | ng Address   | Date Incurred or Established  | M   | / <u></u>  |  |
| City  | State Zip Code   | Date Due  |   |  |  |
| _[/   | A. Has loan been restructured?   | If yes, date originally incurre   | d i i   | ·  |  |
| E     | Amount of this Draw:   | Boloneo   |   | and your general new general of the second sec |  |
| ſ     | C. Are other parties secondarily liable for the debt incu  | rred?<br>nust be reported on Schedule C.)   |   |  |  |
| [     | <ul> <li>Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or othe</li> <li>No</li> <li>Yes</li> <li>If yes, specify:</li> </ul>   | of deposit, chattel papers,   | ر حد میں محمد اور میں<br>اور میں میں میں اور میں<br>اور میں اور میں | value of this collateral?  |  |
|       | ······   |   | interest in it  |  |  |
| E     | Are any future contributions or future receipts of inte<br>collateral for the loan?      No      Yes If yes,   | erest income, pledged as<br>specify:  | l<br>Kanatin Afainati   | estimated value?   |  |
|       | A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  | Location of account:  | · · · · · · · · · · · · · · · · · · ·   |  |  |
|       | Date account established:<br>האיביסייניע אייניער אייניער אייניער אייניער אייניער   | Address:  |   |  |  |
|       | Barrie Carrier   | City, State, Zip:   |   |  |  |
| F     | If neither of the types of collateral described above w<br>the loan amount, state the basis upon which this loa  | vas pledged for this loan, or if the<br>an was made and the basis on wh   | amount pleden<br>nich it assures  | ged does not equal or exceed<br>s repayment.   |  |
| ſ     | B. COMMITTEE TREASURER<br>Typed Name   |   | DATE  |  |  |
|       | Signature  |   |   |  |  |
| Ŀ     |  |   |   |  |  |
|       | I. To the best of this institution's knowledge, the  | terms of the loan and other inform  | nation regard   | ing the extension of the loan  |  |
|       | are accurate as stated above.<br>II. The loan was made on terms and conditions (in a state of a state | including interest rate) no more fa   | vorable at the  | e time than those imposed for  |  |
|       | similar extensions of credit to other borrowers<br>III. This institution is aware of the requirement tha<br>complied with the requirements set forth at 11   | t a loan must be made on a basi   |   | res repayment, and has   |  |
|       |  |   | DATE  |  |  |
|       | fyped Name (Title (עריין איז   |   |   |  |  |
| 3.3   |  |   | <u> </u>  | Kangandi kangangan ngandi  |  |

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| SCHEDULE D (FEC Form 3X)   |   |  | PAGE OF   |
|--|---|--|---|
| DEBTS AND OBLIGATIONS<br>Excluding Loans   |   | (Use separate<br>schedule(s)<br>for each<br>numbered line) | FOR LINE NUMBER:<br>(check only one) 9  |
| NAME OF COMMITTEE (In Full)<br>MAIANA (MANDER CANA   | ressional Action  | Commit   | ec.   |
| A. Full Name (Last, First, Middle Initial) of Deb  | or or Creditor  | Nature of D  | Debt (Purpose):   |
| Mailing Address  |   |  |   |
| City State   | Zip Code  |  |   |
| Outstanding Balance Beginning This Period  |   |  |   |
| Amount Incurred This Period<br>المسجود الاستين المسجود   | Payment This Period   | i i  | ng Balance at Close of This Period  |
| B. Full Name (Last, First, Middle Initial) of Debto  | Beerland on Oberlandse 21. each a berefit<br>or or Creditor   |  | eet (Purpose):  |
| Mailing Address  |   |  |   |
| City State   | Zip Code  |  |   |
| Outstanding Balance Beginning This Period  |   |  |   |
| Amount Incurred This Period  | Payment This Period   | المدين <i>المسيحة</i> الم                                  | ng Balance at Close of This Period  |
| C. Full Name (Last, First, Middle Initial) of Debi   | lord and a dimensional and the dimensional dime |  | entitientinetitettientiteritientitettientitettientitettientitettientitettientitettientitettientitettientitettie   |
|  |   |  |   |
| Mailing Address  |   |  |   |
| City   | State Zip Code  |  |   |
| Outstanding Balance Beginning This Period  |   |  |   |
| Amount Incurred This Period  | Payment This Period   |  | ng Balance at Close of This Period  |
| and the second sec | line norther the three states   | ų (  | m() <u></u>   |
| ) SUBTOTALS This Period This Page (optional)   |   | ►  | n og en som den som en som  |
| 2) TOTALS This Period (last page this line numbe   | r only)   | ►  | ר בעלי העיר לאינים לאייי לאיי איז איין איין איין איין איין איין אי  |
| 3) TOTAL OUTSTANDING LOANS from Schedule   | C (last page only)  | ►  | ار می از منطق با می از معامل می از می<br>از معامل معامل می از معامل می از معامل می از معامل می از م<br>از معامل معامل می از معامل می از معامل می از معامل می از م |
| 4) ADD 2) and 3) and carry forward to appropriate  | ine of Summary Page (last page or   |  | · Sher - Sherika a tradition  |

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

| ITEMIZED INDEPENDENT EXPENDITURES  | PAGE OF<br>FOR LINE 24 OF FORM 3X  |
|--|--|
| NAME OF COMMITTEE (In Full)<br>NAME OF COMMITTEE (In Full)<br>Check if 24-hour notice 48-hour notice   | COMM FEC IDENTIFICATION NUMBER V   |
| Full Name (Last, First, Middle Initiai) of Payee   | Date   |
| Mailing Address  |  |
| City State Zip Code  | ביים ווייניים אורייניים אורייניים אורייים איין איין איין איין איין איין איין |
| Purpose of Expenditure Category/   | Office Sought: House State:  |
| Name of Federal Candidate Supported or Opposed by Expenditure:   | Check One: Support Oppose  |
| Calendar Year-To-Date Per Election   | Disbursement For: Primary General  |
| Full Name (Last, First, Middle Initiat) of Payee   |  |
| Mailing Address  | Amount   |
| City State Zip Code  | יישר עלים איז                            |
| Purpose of Expenditure Category/<br>Type   | Office Sought: House State:  |
| Name of Federal Candidate Supported or Opposed by Expenditure:   | Check One: Support Oppose  |
| Calendar Year-To-Date Per Election   | Disbursement For: Primary General Other (specify)                            |
| (a) SUBTOTAL of Itemized Independent Expenditures  |  |
| (b) SUBTOTAL of Uniternized Independent Expenditures   | · · ·  |
| (c) TOTAL Independent Expenditures   |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent or party committee) any political party committee or its agent. |  |
| Signature  |  |
|  |  |

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#### SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) **ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**

| ON BEHALF OF CANDIDATES FOR FED 2 U.S.C. §441a(d))   | PAGE OF  |  |
|--|--|--|
| (To be used only   | eral Election) FOR LINE 25 OF FORM 3X  |  |
| NAME OF COMMITTEE (In Full)  | essional Hotion (  | MMILEC Check if<br>24-hour notice  |
| Has your committee been designated to make U<br>coordinated expenditures by a political party committee? | Full Name of Subordinate Committee   |  |
| YES, name the designating committee:   | Mailing Address  |  |
|  | City   | State ZIP Code   |
| Full Name (Last, First, Middle Initial) of Each Payee  | L  | Purpose of Expenditure   |
| Mailing Address  |  | Date Type  |
| City State   | Zip Code   |  |
| Name of Federal Candidate Supported Office Sough   | nt: House State:<br>Senate District:<br>Presidential   |  |
| Aggregate General Election   | יישטער איז   | Limit Raised Due to Opponent's Spend-<br>ing (2 U.S.C. §441a(i)/441a-1)  |
| Full Name (Last, First, Middle Initial) of Each Payee  |  | Purpose of Expenditure   |
| Mailing Address  |  | Date   |
| City State Name of Federal Candidate Supported Office Soud   | Zip Code   |  |
| Name of Federal Candidate Supported Office Sough   | ht: House State:<br>Senate District:<br>Presidential   |  |
|  | i en ston die station die station die station<br>Be<br>New ston die station die station die station die station die st | Limit Raised Due to Opponent's Spend-<br>ing (2 U.S.C. §441a(i)/441a-1)  |
| Full Name (Last, First, Middle Initial) of Each Payee  |  | Purpose of Expenditure<br>Category/<br>Type  |
| Mailing Address  |  | Date   |
| City State Name of Federal Candidate Supported Office Sound  | Zip Code   |  |
| Name of Federal Candidate Supported Office Sough   | ht: House State:<br>Senate District:<br>Presidential   |  |
| Aggregate General Election   | in and a family and the second se         | Limit Raised Due to Opponent's Spend-<br>ing (2 U.S.C. §441a(i)/441a-1)  |
| SUBTOTAL of Expenditures This Page (optional)  |  | الم من المحرك المحمد الم من ( المحرك من ) من ( المحرك من ) من المحرك من المحرك من المحرك من المحرك من المحرك م<br>المحرك محرك من ( المحرك من ( المحرك من ( المحرك من |

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FEC Schedule F (Form 3X) Rev. 02/2003

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## SCHEDULE H1 (FEC Form 3X)

### **METHOD OF ALLOCATION FOR:**

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Chamber Congressional Action Committee USE ONLY ONE SECTION, A or B

# A. State and Local Party Committees

Fixed Percentage (select one)

\_ Presidential-Only Election Year (28% Federal)

\_\_\_\_\_ Presidential and Senate Election Year (36% Federal)

— Senate-Only Election Year (21% Federal)

\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

# **B.** Separate Segregated Funds and Nonconnected Committees

| Flat Minimum Federal Percentage                | 9                          |   |
|--|----------------------------|---|
| If the committee will allocate using <b>or</b> | the flat minimum percenta  | ge of 50% federal funds, check  |
| If the committee is spending more              | than 50% federal funds, in | dicate ratio below  |
| Federal  |                            | Contraction of the second s |
| Nonfederal                                     |                            | ₩<br>₩<br>₩   |
| This ratio applies to (check all that          | apply):                    |   |
| Administrative                                 | ter Drive                  | communications Referencing Party Only   |

#### SCHEDULE H2 (FEC Form 3X) PAGE OF **ALLOCATION RATIOS** OF COMMITTEE No Full) Action (Immittee RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT. Methods of allocation: I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised. II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only: Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method. ACTIVITY OR EVENT IDENTIFIER FEDERAL % **NONFEDERAL %** ACTIVITY IS: الحاد بالمعمليات علل بدعل Fundraising Direct Candidate Support % % الميدة المرجا المراج CHECK IF THE RATIO IS: New Revised Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER **FEDERAL % NONFEDERAL %** ACTIVITY IS: Fundraising Direct Candidate Support % % CHECK IF THE RATIO IS: New Revised Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER **FEDERAL % NONFEDERAL %** ACTIVITY IS: لاتفاعا فعاليت فعاليه بالألا rrensparre g Fundraising Direct Candidate Support % % CHECK IF THE RATIO IS: Revised Same as Previously Reported New ACTIVITY OR EVENT IDENTIFIER **FEDERAL % NONFEDERAL %** ACTIVITY IS: agencia per cara p 1710 T (12 ------Fundraising Direct Candidate Support % % www.come.col CHECK IF THE RATIO IS: New Revised Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER **NONFEDERAL %** FEDERAL % ACTIVITY IS: Fundraising Direct Candidate Support % % CHECK IF THE RATIO IS: New Revised Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER FEDERAL % **NONFEDERAL %** ACTIVITY IS: Fundraising Direct Candidate Support **%** % CHECK IF THE RATIO IS: Revised New Same as Previously Reported

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| SCHEDULE  | H3 (FEC Form 3X)              |    |
|-----------|-------------------------------|----|
| TRANSFERS | FROM NONFEDERAL ACCOUNTS F    | OR |
| ALLOCATED | FEDERAL / NONFEDERAL ACTIVITY | (  |

|  | FOR LINE 18a OF FORM 3X  |
|--|--|
| MANE OF COMMITTEE ( Full) Mamber Charlessional A   | tion ammittee  |
| NAME OF ACCOUNT DATE OF RECEIPT  | TOTAL AMOUNT TRANSFERRED   |
|  | and and and the fact that the first of the set   |
| BREAKDOWN OF TRANSFER RECEIVED   |  |
|  | الحديم بي <del>المستقلية المسلمة معركة معركة مع المعدة المعدة المعدة المستقلية الم</del> الية الم  |
| i) Total Administrative  | her all and the strength of the section of the sect |
|  | فمحدا معاليين فيعط فحط فحدادهم المعاك معالمحا  |
| ii) Generic Voter Drive  |  |
|  |  |
| iii) Exempt Activities   | ار در باین است.<br>می در باین است. است. است. است. می است. می این می این است. این این است. است. است. است. است. است. است. است.   |
|  |  |
| Iv) Direct Fundraising (List Activity or Event Identifier)   |  |
| ···, -·································  |  |
| ון<br>איז איז איז איז איז איז איז איז איז איז  | <br>\;   |
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| منیور به در مارد میرد. در مارد میرد از با میکند. میرد میرد <mark>باشند میک</mark> ند میکند.<br>مارد میرد مارد میرد در مارد میرد از با میکند میکند میکند. |  |
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| i);<br>; المحمد المحم   | י געריגעיל אראליטיילעריילאראלייניילע אוינער איינער איינער איינער איינער איינער איינער איינער איינער איינער איי<br>דיי געריגעילי געריינער איינער איינ  |
| c) Total Amount Transferred For Direct Fundraising   |  |
| c) lotal Amount Transferred For Direct Fundraising   | לבידיולי שלבאיישלעניםלגניםלג <u>אשים יי</u> וינרעשיל איניי <sup>ע</sup> יישלענים ל   |
| v) Direct Candidate Support (List Activity or Event Identifier)  |  |
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| ار به میکور به رواند میکور به میکور به میکور میکور میکور به میکور میکور میکور میکور میکور میکور میکور میکور می<br>مرابع                                  |  |
| 8)   | - <u></u> 1 <sup>1</sup>   |
| بالميلا يعلال حذابهما مسالمسلاسها مسالدها  |  |
| b)   |  |
|  | ן אווערנגיבאל <del>ר ברו היבל היאל היב אוויאלי הבבלצב אל הבגל היה</del> ל<br>דיו   |
| c) Total Amount Transferred For Direct Candidate Support   | 11   |
|  |  |
|  | ,  |
| vi) Public Communications Referring Only to Party (Made by PAC)  | In the second  |
| TOTALS FOR BREAKDOWN OF TRANSFER RECEIV  | /ED  |
|  |  |
| المتعادية من   | المحمد الم  |
| TOTAL This Period (Administrative)   | أأبعد والمسجة ويبطاق   |
| المراجع محمد محمد محمد محمد محمد محمد محمد محم   | an a   |
| TOTAL This Period (Generic Voter Drive)  | and the second   |
|  | أنصيك يتعطف والمكالم والمناب المتعالية والمسترك والمحاكين  |
| TOTAL This Deviced (Everyth Astivities)  | Ľ.   |
|  | المتعادية المناقبة المتحدثين والمستلح والمحالية  |
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| TOTAL This Period (Direct Fundraising)   | al Franchise Charles and Charles and Charles   |
|  | in a subscription of the second s   |
| TOTAL This Period (Direct Candidate Support)   | n Anna Marana an Anna Chanailte an Anna Anna Anna Anna Anna Anna Anna  |
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| TOTAL This Period (Total Amount Transferred)   | Carther Con Der Berten Bruchen Con Care  |
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| SC           | CHEDULE H4 (FEC Form 3X)   |                            |  |                          |  |  |
|--------------|--|----------------------------|--|--------------------------|--|--|
| DI           | SBURSEMENTS FOR ALLOCAT  | ED                         |  |                          |  | PAGE OF  |
| FE           | EDERAL/NONFEDERAL ACTIVIT  | Y                          |  |                          |  | FOR LINE 21a OF FORM 3X  |
| $\mathbb{N}$ |  | ( CIN                      | MMC  | innal                    | Anlida   | Manaillas  |
| Ц            |  |                            | VINCSS   |                          | MUTION.  | UNINITEE   |
| A:           | Full Name (Last, First, Middle Initial)                                |                            | V  |                          | Allocated Activity o   | <b>—</b> —   |
|              | Mailing Address  |                            |  |                          |  | Direct Candidate Support   |
|              | City   | State                      | Zip Code   | ··· ·                    |  | (ref to party only) by PAC   |
|              |  |                            |  |                          |  | or Event Year-To-Date  |
|              | Purpose of Disbursement:   |                            |  | ود کست کستا              | inconton voiter.   |  |
|              | Activity or Event Identifier:  |                            |  | Laster Bernd             | to in the second se   |  |
|              |  |                            |  | Category/<br>Type        |  |  |
|              | FEDERAL SHARE +  | -                          | NONFEDERAL   |                          |  | OTAL AMOUNT  |
|              | . <u>1</u> :   | :                          |  | ويطالب بالمعيناتين       | 4 I  | ין<br>ליון ארלעונורליון אלשראליידעלאינשל יואבל<br>ליון ארלעונורליון אלשראליידעלאינשל יואבל                               |
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| В.           | Full Name (Last, First, Middle Initial)                                |                            |  |                          | Allocated Activity o   |  |
|              | Mailing Address  |                            |  |                          | Administrative   | Fundraising     Exempt     Direct Candidate Support  |
|              | 0:1  | 01-1-                      | Zin Code   |                          |  |  |
|              | City   | State                      | Zip Code   |                          |  | (ref to party only) by PAC   |
|              | Purpose of Disbursement:   |                            |  | الصداد من عدا            |  |  |
|              | Activity or Suppt Identifier:  |                            |  |                          | L  | e of a constant and a local  |
|              | Activity or Event Identifier:  |                            |  | Category/<br>Type        | Date   |  |
|              | FEDERAL SHARE +  | +                          | NONFEDERAL   |                          | <u>ר = ד</u>   | OTAL AMOUNT  |
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|              |  |                            | There are a second states and the second | n Caree Const Alman Care |  | <u>an San Bankara an Shara an I</u>  |
| C.           | Full Name (Last, First, Middle Initial)                                |                            |  |                          | Allocated Activity o   | Fundraising  |
|              | Mailing Address  |                            |  |                          |  | Direct Candidate Support   |
|              | City   | State                      | Zip Code   |                          |  |  |
|              | City   | 51010                      |  |                          |  | (ref to party only) by PAC   |
|              | Purpose of Disbursement:   |                            |  |                          |  | ן<br>להיה להיה אל המסול ההגלבו בהלל שבול שבור אותי<br>אל היה להיה אל המסול היה אלי שבול אותי אותי אלי שבול אותי אותי אלי |
|              | Activity or Event Identifier:  |                            | <u> </u>   |                          | i an Peratura Marrie   | and and reduced and with   |
|              |  |                            |  | Category/<br>Type        | Date   |  |
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|              |  | <u>دوام</u>                | (Pring Brane Brane (Phile  | -:`                      | l Leinanova  | a sector of the sector of the sector of  |
| SL           | JBTOTAL of Allocated Federal and NonFederal Ac                         | tivity This                | Page   |                          |  |  |
|              | FEDERAL SHARE +  |                            | NONFEDERAL   |                          |  |  |
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| тс           | OTAL This Period (last page for each line only)(Fe                     | deral share                | e to 21(a)(i) and  | d NonFederal sh          | are to 21(a)(ii))  |  |
|              |  |                            | NONFEDERAL   | SHARE                    |  |  |
|              | and a surface the stress time Practice stress for surface              |                            |  |                          | and a strength of the second | and the Subscription of  |

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## SCHEDULE H5 (FEC Form 3X)

#### TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY (To -. Distal .....

| be used by State, District and Local Party Committees Only)  PAGE OF FOR LINE 18b OF FORM   |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| NAME OF COMMITTEE (In Full)   |  |  |  |  |  |  |
| INATURA CRAWIDER (IN  | onessional hypor   | 1 UMMILATE   |  |  |  |  |
| NAME OF ACCOUNT   |  |  |  |  |  |  |
|   |  | and a stand of the stand of the stand of the stand   |  |  |  |  |
|   |  |  |  |  |  |  |
| BREAKDOWN OF THIS TRANSFER  i) Voter Registration   | VOTER REGISTR  |  |  |  |  |  |
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| ii) Voter ID<br>Total Amount Transferred for Voter  | ID   | ا<br>الاست. 20 مارين ماريسيال  |  |  |  |  |
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| III) GOTV   | 1  | المستخصفي <i>ت مد</i> ث مد ثنية ملك والم   |  |  |  |  |
| Total Amount Transferred for GOT  |  | (Insulant Institute Contractions)  |  |  |  |  |
| iv) Generic Campaign Activity   | 8  | GENERIC CAMPAIGN ACTIVITY  |  |  |  |  |
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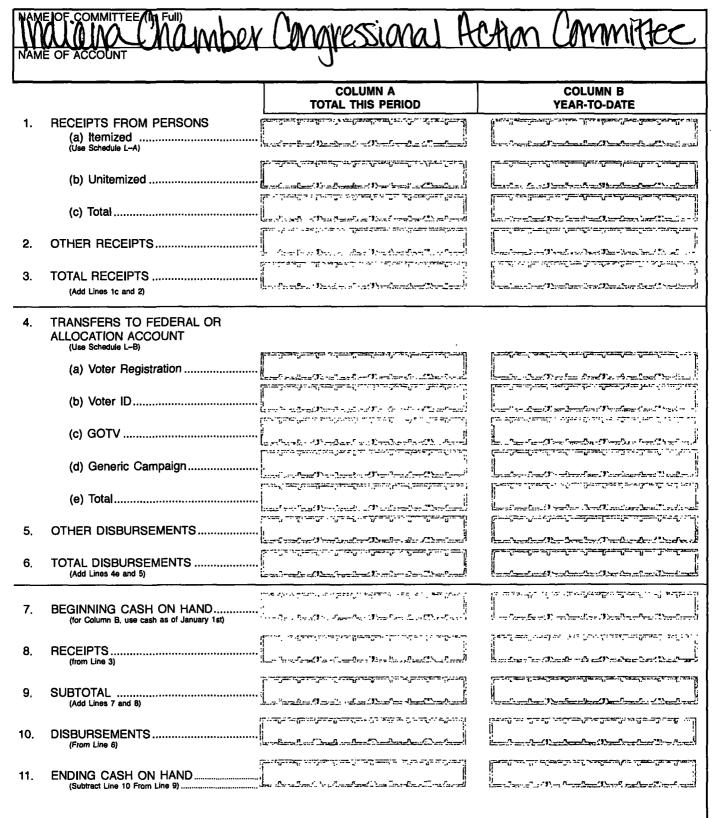
| SCHEDULE H6 (FEC Form 3X)<br>DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS   | SCHEDULE H6 (FEC Form 3X)   |  |  |  |
|---|---|--|--|--|
| FOR ALLOCATED FEDERAL ELECTION ACTIVITY   | PAGE OF   |  |  |  |
| (To be used by State, District and Local Party Committees Only)   | FOR LINE 30a OF FORM 3X   |  |  |  |
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| Indiana (Mamber Cingressional AC)   | ion L'Ammittee  |  |  |  |
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| SUBTOTAL of Shared Federal and Levin Activity This Page<br>FEDERAL SHARE + LEVIN SHARE  | = TOTAL AMOUNT  |  |  |  |
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FEC Schedule H6 (Form 3X) Rev. 02/2003

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# SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS



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#### SCHEDULE L-A (EEC Form 3X) ITEN

| SCREDULE L-A (FEC FORM 3X)   |  | PAGE OF   |
|--|--|---|
| TEMIZED RECEIPTS OF LEVIN FUNDS  | Use separate schedule(s)<br>for each category of the<br>Aggregation Page | FOR LINE NUMBER:<br>(check only one) 1a 2   |
| Any information copied from such Reports and Statements may not<br>or for commercial purposes, other than using the name and address | be sold or used by any perso<br>of any political committee to            | n for the purpose of soliciting contributions solicit contributions from such committee.  |
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|  | Zip Code   | Amount of Each Receipt this Period  |
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| SCHEDULE L-B (FEC Form 3X)   |                                     |   |
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| Any information copied from such Reports and Statements may            |                                     |   |
| or for commercial purposes, other than using the name and add          | lress of any political committee to | solicit contributions from such committee.  |
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| Federal Election Commission<br>ENVELOPE REPLACEMENT PAGE FOR INCO<br>The FEC added this page to the end of this filing to inc | MING DOCUMENTS                  |
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