

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**

3. IS THIS REPORT **NEW (N)** OR **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on / / 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 / / through / /

/ / through / /

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 Jerome E Fox Jr.

Signature of Treasurer Jerome E Fox Jr. [Electronically Filed] Date / /

/ /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="11260.76"/>	<input type="text" value="11260.76"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6609.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6937.96"/>	<input type="text" value="17202.80"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="13546.96"/>	<input type="text" value="28463.56"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="7631.97"/>	<input type="text" value="22548.57"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5914.99"/>	<input type="text" value="5914.99"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5518.96	11704.92
(ii) Unitemized	1419.00	5497.88
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6937.96	17202.80
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6937.96	17202.80
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	6937.96	17202.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6937.96	17202.80

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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500.00	20500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	1131.97	2048.57
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7631.97	22548.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7631.97	22548.57

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6937.96	17202.80
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6937.96	17202.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Cara Bachenheimer
Full Name (Last, First, Middle Initial)

Mailing Address 9323 Old Mansion Road

City Alexandria State VA Zip Code 22309

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

Name of Employer Invacare Corporation Occupation Sr. VP Government Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1999.92**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.9159

Amount of Each Receipt this Period **999.96**

Biweekly PR ded \$83.33 start 07/15/15

B. Christopher Carter
Full Name (Last, First, Middle Initial)

Mailing Address 17 W. Harvard Street

City Orlando State FL Zip Code 32804

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

Name of Employer Invacare Corporation Occupation Director of Operations - Sanford

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.9161

Amount of Each Receipt this Period **120.00**

Biweekly PR ded \$10 start 07/15/15

C. Cory Cooper
Full Name (Last, First, Middle Initial)

Mailing Address 11821 3rd Place SE

City Lake Stevens State WA Zip Code 98258

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

Name of Employer Invacare Corporation Occupation Territory Business Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.9162

Amount of Each Receipt this Period **120.00**

Biweekly PR ded \$10 start 07/15/15

SUBTOTAL of Receipts This Page (optional).....▶	1239.96
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. John Domanick
Full Name (Last, First, Middle Initial)

Mailing Address 205 Franklin Lake Circle

City Oxford State MI Zip Code 48371

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

Name of Employer Invacare Corporation Occupation Territory Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **535.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.9163

Amount of Each Receipt this Period
 300.00

Biweekly PR ded \$25 start 07/15/15

B. Jerome E. Fox Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 26114 Cobblestone Trail

City Columbia Station State OH Zip Code 44028

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

Name of Employer Invacare Corporation Occupation VP - Corporate Tax

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.9166

Amount of Each Receipt this Period
 120.00

Biweekly PR ded \$10 start 07/15/15

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

Mailing Address 376 County Road 40

City Sullivan State OH Zip Code 44880

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

Name of Employer Invacare Corporation Occupation Manager - Corporate Documentation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.9169

Amount of Each Receipt this Period
 120.00

Biweekly PR ded \$10 start 07/15/15

SUBTOTAL of Receipts This Page (optional).....▶	540.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Mark Kline
Full Name (Last, First, Middle Initial)

Mailing Address 4488 Regal Circle

City Akron State OH Zip Code 44321

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

Name of Employer Invacare Corporation Occupation Director Retail Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.9173

Amount of Each Receipt this Period **600.00**

Biweekly PR ded \$50 start 07/15/15

B. Jill Kolczynski
Full Name (Last, First, Middle Initial)

Mailing Address 805 Horseshoe Way

City Avon Lake State OH Zip Code 44012

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

Name of Employer Invacare Corporation Occupation Product Development Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **485.00**

Date of Receipt **11 / 15 / 2015**

Transaction ID : SA11AI.9174

Amount of Each Receipt this Period **225.00**

Biweekly PR ded \$25 start 07/15/15

C. Judith Kovacs
Full Name (Last, First, Middle Initial)

Mailing Address 5341 Sturbridge Court

City Sheffield Village State OH Zip Code 44054

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

Name of Employer Invacare Corporation Occupation VP Customer Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.9175

Amount of Each Receipt this Period **180.00**

Biweekly PR ded \$15 start 07/15/15

SUBTOTAL of Receipts This Page (optional).....▶	1005.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Joseph Kuebler
Full Name (Last, First, Middle Initial)

Mailing Address 38554 Avalon Drive

City North Ridgeville State OH Zip Code 44039

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

Name of Employer Invacare Corporation Occupation Engineering Manager - Respiratory

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : SA11AI.9176

Amount of Each Receipt this Period
120.00

Biweekly PR ded \$10 start 07/15/15

B. Seth Linebrink
Full Name (Last, First, Middle Initial)

Mailing Address 14920 Diagonal Road

City Lagrange State OH Zip Code 44050

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

Name of Employer Invacare Corporation Occupation Manager, Financial Reporting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : SA11AI.9178

Amount of Each Receipt this Period
60.00

Biweekly PR ded \$5 start 07/15/15

C. Matthew Monaghan
Full Name (Last, First, Middle Initial)

Mailing Address 14707 Indian Creek Road

City Fort Wayne State IN Zip Code 46814

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

Name of Employer Invacare Corporation Occupation Chairman & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2015
Transaction ID : SA11AI.9180

Amount of Each Receipt this Period
1000.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional).....▶	1180.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Nirav Pandya
Full Name (Last, First, Middle Initial)

Mailing Address 2333 Brigadoon

City Westlake State OH Zip Code 44145

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

Name of Employer Invacare Corporation Occupation VP Engineering

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.9181

Amount of Each Receipt this Period
 120.00

Biweekly PR ded \$10 start 07/15/15

B. Brian Pruzan
Full Name (Last, First, Middle Initial)

Mailing Address 170 Centennial Drive

City Avon Lake State OH Zip Code 44012

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

Name of Employer Invacare Corporation Occupation Senior Director Solutions Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.9182

Amount of Each Receipt this Period
 120.00

Biweekly PR ded \$10 start 07/15/15

C. Jeffrey Randall
Full Name (Last, First, Middle Initial)

Mailing Address 373 Main Street

City Lisbon Falls State ME Zip Code 04252

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

Name of Employer Invacare Corporation Occupation Territory Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.9183

Amount of Each Receipt this Period
 120.00

Biweekly PR ded \$10 start 07/15/15

SUBTOTAL of Receipts This Page (optional).....	360.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Frank Roche
Full Name (Last, First, Middle Initial)

Mailing Address 16414 St. Anthony Lane

City Cleveland State OH Zip Code 44111

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

Name of Employer Invacare Corporation Occupation VP National Sales Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.9184

Amount of Each Receipt this Period **300.00**

Biweekly PR ded \$25 start 07/15/15

B. Gretchen Schuler
Full Name (Last, First, Middle Initial)

Mailing Address 28710 Berkshire Drive

City North Olmsted State OH Zip Code 44070

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

Name of Employer Invacare Corporation Occupation Director of Litigation Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1008.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.9185

Amount of Each Receipt this Period **504.00**

Biweekly PR ded \$42 start 07/15/15

C. Charles Summers
Full Name (Last, First, Middle Initial)

Mailing Address 32805 N. The Old Road

City Castaic State CA Zip Code 91384

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

Name of Employer Invacare Corporation Occupation Territory Business Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.9213

Amount of Each Receipt this Period **150.00**

Biweekly PR ded \$15 starting August 15

SUBTOTAL of Receipts This Page (optional).....▶	954.00
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 12 OF 17
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Kimberly Wilhelm
Full Name (Last, First, Middle Initial)
Mailing Address 2010 Gulf Road
City Elyria State OH Zip Code 44035
FEC ID number of contributing federal political committee. **C**
Name of Employer Invacare Corporation Occupation Sales & Service Manager - TAG
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2015
Transaction ID : SA11AI.9193
Amount of Each Receipt this Period 240.00
Biweekly PR ded \$20 start 07/15/15

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	5518.96

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial)

A. BUCSHON FOR CONGRESS

Mailing Address PO BOX 250

City NEWBURGH State IN Zip Code 47629

Purpose of Disbursement
Fundraising event of November 13

Candidate Name
LARRY D. BUCSHON

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: IN District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2015

Transaction ID : **SB23.9217**

Amount of Each Disbursement this Period

500.00

011

Category/
Type

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOHN BOEHNER

Mailing Address 7908-12 Cincinnati Dayton Road

City West Chester State OH Zip Code 45069

Purpose of Disbursement
Fundraising event of July 20, 2015

Candidate Name
JOHN A BOEHNER

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: OH District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2015

Transaction ID : **SB23.9197**

Amount of Each Disbursement this Period

2500.00

011

Category/
Type

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ROY BLUNT

Mailing Address PO BOX 10178

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement
Fundraising event of August 12, 2015

Candidate Name
ROY BLUNT

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MO District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 05 / 2015

Transaction ID : **SB23.9206**

Amount of Each Disbursement this Period

500.00

011

Category/
Type

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

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

3500.00

**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 checked="" 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)

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial)

A. MIKE KELLY FOR CONGRESS

Mailing Address PO BOX 476

City LYNDORA State PA Zip Code 16045

Purpose of Disbursement
Fundraising event of August 24, 2015

Candidate Name

MIKE KELLY

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		17		2015

Transaction ID : SB23.9210

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. PORTMAN FOR SENATE COMMITTEE

Mailing Address 8331 LITTLE HARBOR DRIVE

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement
Fundraising event of September 11, 2015

Candidate Name

ROB PORTMAN

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2015

Transaction ID : SB23.9211

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PRICE FOR CONGRESS

Mailing Address P.O. Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement
Fundraising event of August 18, 2015

Candidate Name

THOMAS EDMUNDS PRICE

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2015

Transaction ID : SB23.9208

Amount of Each Disbursement this Period

1000.00

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

2500.00

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 checked="" 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)

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial)

A. RICHARD BURR COMMITTEE; THE

Mailing Address POST OFFICE BOX 5928

City WINSTON-SALEM State NC Zip Code 27113

Purpose of Disbursement
Fundraising event of August 12, 2015

Candidate Name
RICHARD BURR

Office Sought: House
 Senate
 President
State: NC District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 05 / 2015

Transaction ID : SB23.9198

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

500.00

6500.00

**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)

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Account Analysis Charge

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2015

Transaction ID : SB29.9196

Amount of Each Disbursement this Period

256.33

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Account Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : SB29.9209

Amount of Each Disbursement this Period

186.71

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Acct Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SB29.9214

Amount of Each Disbursement this Period

250.96

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

694.00

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

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NAME OF COMMITTEE (In Full)

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Account Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2015

Transaction ID : SB29.9215

Amount of Each Disbursement this Period

154.35

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Account Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : SB29.9221

Amount of Each Disbursement this Period

127.40

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address 1900 East Ninth Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Corporate Account Analysis Fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SB29.9222

Amount of Each Disbursement this Period

156.22

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

437.97

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

1131.97
