

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
INDIANA FARM BUREAU INC ELECT PAC INC

ADDRESS (number and street) **P.O. Box 1290**
 Check if different than previously reported. (ACC) **INDIANAPOLIS IN 46206**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00169722 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 / / 2016 through / / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Rueff, Elaine, , ,
Type or Print Name of Treasurer

Signature of Treasurer Rueff, Elaine, , , [Electronically Filed] Date / / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

INDIANA FARM BUREAU INC ELECT PAC INC

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2016"/> | | 148356.04 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 145967.17 | |
| (c) Total Receipts (from Line 19) | 3340.99 | 10476.59 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 149308.16 | 158832.63 |
| 7. Total Disbursements (from Line 31)..... | 28780.81 | 38305.28 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 120527.35 | 120527.35 |
| 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 FARM BUREAU INC ELECT PAC INC

Report Covering the Period: From: 04 / 01 / 2016 To: 06 / 30 / 2016

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 250.00 | 800.00 |
| (ii) Unitemized | 3034.09 | 9563.42 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 3284.09 | 10363.42 |
| (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) | 3284.09 | 10363.42 |
| 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.)..... | 56.90 | 113.17 |
| 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)).....▶ | 3340.99 | 10476.59 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 3340.99 | 10476.59 |

DETAILED SUMMARY PAGE

of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 4780.81 | 12804.28 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 4780.81 | 12804.28 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 5000.00 | 6000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | -500.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 1.00 |
| (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 | 1.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 19500.00 | 19500.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 28780.81 | 38305.28 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 28780.81 | 38305.28 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 3284.09 | 10363.42 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 1.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 3284.09 | 10362.42 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 4780.81 | 12804.28 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 4780.81 | 12804.28 |

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

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

FOR LINE NUMBER: PAGE 6 OF 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
INDIANA FARM BUREAU INC ELECT PAC INC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fleenor, Christopher, , ,

Mailing Address 4991 S COUNTY ROAD 750 E

City Hardinsburg State IN Zip Code 47125

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

Name of Employer (for Individual) self-employed Occupation (for Individual) farmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2016

Transaction ID : SA11AI.6265

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 250.00 |
| TOTAL This Period (last page this line number only).....▶ | 250.00 |

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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Aramark

Mailing Address Aramark Chicago Lockbox
27310 Network Place

City Chicago State IL Zip Code 60673-1273

Purpose of Disbursement
food for oversight committee

001
Category/
Type

Candidate Name

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 Y
04 / 13 / 2016

FEC Identification Number

C
Transaction ID : SB21B.6258
Amount of Each Disbursement this Period
 49.87

Memo Item

Full Name (Last, First, Middle Initial)

B. Aramark

Mailing Address Aramark Chicago Lockbox
27310 Network Place

City Chicago State IL Zip Code 60673-1273

Purpose of Disbursement
food for oversight comm

Category/
Type

Candidate Name

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 Y
04 / 13 / 2016

FEC Identification Number

C
Transaction ID : SB21B.6259
Amount of Each Disbursement this Period
 125.43

Memo Item

Full Name (Last, First, Middle Initial)

C. Belden, Wayne, , ,

Mailing Address 5061 N. US 231

City Rensselaer State IN Zip Code 47978

Purpose of Disbursement
reimburse for meeting expense

001
Category/
Type

Candidate Name

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 Y
06 / 16 / 2016

FEC Identification Number

C
Transaction ID : SB21B.6252
Amount of Each Disbursement this Period
 109.88

Memo Item

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

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

285.18

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6258

6811

Form/Schedule: SB21B

Transaction ID: SB21B.6259

6811

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6252

6850 - Wayne Belden Round the Clock, Valparaiso, IN \$109.88, CD1 meeting breakfast

Form/Schedule:

Transaction ID:

**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"/> 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 FARM BUREAU INC ELECT PAC INC

A. Belden, Wayne, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5061 N. US 231

City Rensselaer State IN Zip Code 47978

Purpose of Disbursement meeting exp - food and drinks

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 16 / 2016

FEC Identification Number C

Transaction ID : SB21B.6253

Amount of Each Disbursement this Period 214.00

Memo Item

B. Belden, Wayne, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5061 N. US 231

City Rensselaer State IN Zip Code 47978

Purpose of Disbursement meeting food

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 16 / 2016

FEC Identification Number C

Transaction ID : SB21B.6254

Amount of Each Disbursement this Period 146.05

Memo Item

C. Belden, Wayne, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5061 N. US 231

City Rensselaer State IN Zip Code 47978

Purpose of Disbursement food and drink for CD meeting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 30 / 2016

FEC Identification Number C

Transaction ID : SB21B.6255

Amount of Each Disbursement this Period 56.81

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 416.86

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6253

6850, Birkey Family Farmes, Kouts, IN, Dinner buffet for 20 State meetings

Form/Schedule: SB21B

Transaction ID: SB21B.6254

6850 Denny's Restaurant, Hebron, IN - State house meeting lunch

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6255

6851 Aurelio's of Crown Point, IN, State House district 18 meeting

Form/Schedule:

Transaction ID:

**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"/> 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 FARM BUREAU INC ELECT PAC INC

A. District 9 Indiana Farm Bureau

Full Name (Last, First, Middle Initial)

Mailing Address c/o Mary Kay Turner
1161N Carithers Road

City Princeton State IN Zip Code 47670

Purpose of Disbursement reimburse food for meeting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6260

Amount of Each Disbursement this Period: 101.42

Memo Item

B. Fleenor, Christopher, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4991 S COUNTY ROAD 750 E

City Hardinsburg State IN Zip Code 47125

Purpose of Disbursement mileage and per diem

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6230

Amount of Each Disbursement this Period: 100.00

Memo Item

C. Fleenor, Christopher, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4991 S COUNTY ROAD 750 E

City Hardinsburg State IN Zip Code 47125

Purpose of Disbursement mileage and per diem

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6231

Amount of Each Disbursement this Period: 169.00

Memo Item

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

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

370.42

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6260

6813 Papa John's \$75.90, Dollar General Store, \$25.62 Indiana House District 64 meeting

Form/Schedule: SB21B

Transaction ID: SB21B.6230

6814 - all per diems and mileage are paid via check. We do not give cash to anyone and do not have a petty cash fund.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6231

6814

Form/Schedule:

Transaction ID:

**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"/> 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 FARM BUREAU INC ELECT PAC INC

A. Gillis, Elaine, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11665 E. 1300 North

City Dunkirk State IN Zip Code 47336

Purpose of Disbursement mileage and per diem

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6232

Amount of Each Disbursement this Period: 134.00

Memo Item

B. Gillis, Elaine, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11665 E. 1300 North

City Dunkirk State IN Zip Code 47336

Purpose of Disbursement mileage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6233

Amount of Each Disbursement this Period: 56.00

Memo Item

C. Hayhurst, Terry, A, ,

Full Name (Last, First, Middle Initial)

Mailing Address 14477 S Carlisle St

City Terre Haute State IN Zip Code 47802

Purpose of Disbursement \$50 per diem and mileage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6234

Amount of Each Disbursement this Period: 135.00

Memo Item

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

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

325.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6232

6815 all payments are issued by check, no cash is ever given.

Form/Schedule: SB21B

Transaction ID: SB21B.6233

6815

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6234

6816 all payments are issued by check, no cash is ever given.

Form/Schedule:

Transaction ID:

**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"/> 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 FARM BUREAU INC ELECT PAC INC

| | | | |
|---|--|---|--------------------------|
| Full Name (Last, First, Middle Initial) A. Hayhurst, Terry, A, , | | Date of Disbursement MM / DD / YYYY 04 / 13 / 2016 | |
| Mailing Address 14477 S Carlisle St | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6235 Amount of Each Disbursement this Period 75.00 | |
| City Terre Haute | State IN | Zip Code 47802 | Category/ Type 001 |
| Purpose of Disbursement \$50 per diem and mileage | | 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: | <input type="checkbox"/> Memo Item | | |

| | | | |
|---|--|---|--------------------------|
| Full Name (Last, First, Middle Initial) B. Hayhurst, Terry, A, , | | Date of Disbursement MM / DD / YYYY 04 / 13 / 2016 | |
| Mailing Address 14477 S Carlisle St | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6236 Amount of Each Disbursement this Period 44.00 | |
| City Terre Haute | State IN | Zip Code 47802 | Category/ Type 001 |
| Purpose of Disbursement \$50 per diem and mileage | | 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: | <input type="checkbox"/> Memo Item | | |

| | | | |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial) C. Hightower Graphics, Inc. | | Date of Disbursement MM / DD / YYYY 06 / 30 / 2016 | |
| Mailing Address 5340 Commerce Circle Suite D | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6263 Amount of Each Disbursement this Period 516.81 | |
| City Indianapolis | State IN | Zip Code 46237 | Category/ Type |
| Purpose of Disbursement letterhead and envelopes | | 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: | <input type="checkbox"/> Memo Item | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 635.81 |
| TOTAL This Period (last page this line number only).....▶ | |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6235

6816

Form/Schedule: SB21B

Transaction ID: SB21B.6236

6816

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6263

6853

Form/Schedule:

Transaction ID:

**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"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

A. Hoar, David, L, ,

Full Name (Last, First, Middle Initial)

Mailing Address 1242 N Campbellsburg Livnoia

City Campbellsburg State IN Zip Code 47108

Purpose of Disbursement mileage and per diem

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6237

Amount of Each Disbursement this Period: 170.00

Memo Item

B. Indiana Farm Bureau, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1290

City Indianapolis State IN Zip Code 46206-1290

Purpose of Disbursement conference call

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 22 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6264

Amount of Each Disbursement this Period: 20.38

Memo Item

C. Lawrence, Susan, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 0275 N 800 E

City Avilla State IN Zip Code 46710

Purpose of Disbursement reimbursement for meeting food

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 30 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6256

Amount of Each Disbursement this Period: 32.01

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 222.39

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6237

6817 all payments are issued by check, no cash is ever given.

Form/Schedule: SB21B

Transaction ID: SB21B.6264

ACH622

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6256

6852 Pizza Hut, Fort Wayne, State house district 85 meeting pizza

Form/Schedule:

Transaction ID:

**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"/> 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 FARM BUREAU INC ELECT PAC INC

A. Newsom, John, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8689 6th Road

City Plymouth State IN Zip Code 46563

Purpose of Disbursement reimburse for food for meeting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6240

Amount of Each Disbursement this Period: 71.76

Memo Item

B. Newsom, John, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8689 6th Road

City Plymouth State IN Zip Code 46563

Purpose of Disbursement reimbursement for meeting food

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6241

Amount of Each Disbursement this Period: 38.10

Memo Item

C. Ruhlman, Laura, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6336 N Newark Road

City Solsberry State IN Zip Code 47459

Purpose of Disbursement reimburse food for meeting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6243

Amount of Each Disbursement this Period: 218.87

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 328.73

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6240

6820 Kroger \$33.76 and Mrs T Bakery \$38 for CD2 meeting

Form/Schedule: SB21B

Transaction ID: SB21B.6241

6820 Bourbon Street Pizza, Plymouth, IN, State house district 17 meeting

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6243

6821 Papa John's \$77.80, Walmart \$71.52 drinks, Subway \$69.55

Form/Schedule:

Transaction ID:

**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"/> 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 FARM BUREAU INC ELECT PAC INC

| | | | |
|---|--|---|---------------------------------------|
| Full Name (Last, First, Middle Initial) A. Scarborough, Denise, , , | | Date of Disbursement MM / DD / YYYY 04 / 13 / 2016 | |
| Mailing Address 21634 S 600 West | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6245 Amount of Each Disbursement this Period [REDACTED] 161.00 | |
| City La Crosse | State IN | Zip Code 46348 | Category/ Type 002 |
| Purpose of Disbursement mileage and \$50 per diem | | 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) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | | | |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) B. Scarborough, Denise, , , | | Date of Disbursement MM / DD / YYYY 04 / 13 / 2016 | |
| Mailing Address 21634 S 600 West | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6246 Amount of Each Disbursement this Period [REDACTED] 35.00 | |
| City La Crosse | State IN | Zip Code 46348 | Category/ Type 002 |
| Purpose of Disbursement mileage for meeting | | 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) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | | | |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) C. Scarborough, Denise, , , | | Date of Disbursement MM / DD / YYYY 04 / 13 / 2016 | |
| Mailing Address 21634 S 600 West | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6247 Amount of Each Disbursement this Period [REDACTED] 72.00 | |
| City La Crosse | State IN | Zip Code 46348 | Category/ Type 002 |
| Purpose of Disbursement mileage for 2 meetings | | 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) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | |
|--|-------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 268.00 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6245

\$50 per diem for serving on committee and \$111 mileage for attending meeting. All payments are issued by check, no cash is ever given.

Form/Schedule: SB21B

Transaction ID: SB21B.6246

6822 paid by check

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6247

6822 paid by check

Form/Schedule:

Transaction ID:

**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"/> 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 FARM BUREAU INC ELECT PAC INC

A. United Farm Family Mutual Ins.

Full Name (Last, First, Middle Initial)

Mailing Address 225 S. East Street

City Indianapolis State IN Zip Code 46202-4056

Purpose of Disbursement printing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6257

Amount of Each Disbursement this Period: 65.00

Memo Item

B. United Farm Family Mutual Ins.

Full Name (Last, First, Middle Initial)

Mailing Address 225 S. East Street

City Indianapolis State IN Zip Code 46202-4056

Purpose of Disbursement 2015 audit

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6261

Amount of Each Disbursement this Period: 1430.00

Memo Item

C. United Farm Family Mutual Ins.

Full Name (Last, First, Middle Initial)

Mailing Address 225 S. East Street

City Indianapolis State IN Zip Code 46202-4056

Purpose of Disbursement postage for letters

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2016

FEC Identification Number: C

Transaction ID : SB21B.6262

Amount of Each Disbursement this Period: 87.30

Memo Item

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1582.30 |
| TOTAL This Period (last page this line number only).....▶ | 4434.69 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6257

6810

Form/Schedule: SB21B

Transaction ID: SB21B.6261

6848

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.6262

6849

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

A. Bucshon for Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 250

City Newburgh State IN Zip Code 47629

Purpose of Disbursement Category/Type

Candidate Name
BUCSHON FOR CONGRESS

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

State: IN District: 08

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C00468256
Transaction ID : SB23.6203
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Friends of Susan Brooks

Full Name (Last, First, Middle Initial)
Mailing Address 9425 N Meridian Street Suite 237

City Indianapolis State IN Zip Code 46260

Purpose of Disbursement Category/Type

Candidate Name
FRIENDS OF SUSAN BROOKS

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

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB23.6201
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Hoosiers for Rokita

Full Name (Last, First, Middle Initial)
Mailing Address 5802 Oak Avenue

City Indianapolis State IN Zip Code 46219

Purpose of Disbursement Category/Type

Candidate Name
HOOSIERS FOR ROKITA, INC.

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

State: IN District: 04

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C00476192
Transaction ID : SB23.6220
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.6203

006828

Form/Schedule: SB23

Transaction ID: SB23.6201

006826

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.6220

006840

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

A. Luke Messer for Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 917

City Shelbyville State IN Zip Code 46176

Purpose of Disbursement

Candidate Name
Luke Messer for Congress

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

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB23.6213
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Walorski for Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 954

City Mishawaka State IN Zip Code 46546-0954

Purpose of Disbursement

Candidate Name
WALORSKI FOR CONGRESS INC

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

State: IN District: 02

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
C00468579
Transaction ID : SB23.6227
Amount of Each Disbursement this Period: 1000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2000.00 |
| TOTAL This Period (last page this line number only).....▶ | 5000.00 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.6213

006836

Form/Schedule: SB23

Transaction ID: SB23.6227

006845

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|--|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input checked="" 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 FARM BUREAU INC ELECT PAC INC

A. Steven R Stemler Election Comm

Full Name (Last, First, Middle Initial)

Mailing Address 1001 Penn Street

City Jeffersonville State IN Zip Code 47130

Purpose of Disbursement
Stemler committee cashed stale check which bank stop pmt had expired

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 05 / 2016

FEC Identification Number: C

Transaction ID : SB27.6273

Amount of Each Disbursement this Period: -500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | -500.00 |
| TOTAL This Period (last page this line number only).....▶ | -500.00 |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Citizens for Jeff Thompson

Mailing Address 6001 North State Rd. 39

City Lizton State IN Zip Code 46149

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2016

FEC Identification Number

C
Transaction ID : SB29.6225
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Tim Brown

Mailing Address PO Box 861

City Crawfordsville State IN Zip Code 47933

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2016

FEC Identification Number

C
Transaction ID : SB29.6202
Amount of Each Disbursement this Period
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Elect Brian Bosma

Mailing Address P.O. Box 44054

City Indianapolis State IN Zip Code 46244

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2016

FEC Identification Number

C
Transaction ID : SB29.6200
Amount of Each Disbursement this Period
1500.00

Memo Item

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

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

4000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6225

006844

Form/Schedule: SB29

Transaction ID: SB29.6202

006827

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6200

006825

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

A. Committee to Elect Pete Miller

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 9

City Brownsburg State IN Zip Code 46112

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C

Transaction ID : SB29.6215

Amount of Each Disbursement this Period: 500.00

Memo Item

B. David Long for State Senate

Full Name (Last, First, Middle Initial)

Mailing Address 7100 W. Jefferson Blvd.

City Fort Wayne State IN Zip Code 46863

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C

Transaction ID : SB29.6211

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Donna Schaibley for State Representative

Full Name (Last, First, Middle Initial)

Mailing Address 11492 St Andrews Lane

City Carmel State IN Zip Code 46032

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C

Transaction ID : SB29.6222

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3500.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6215

006837

Form/Schedule: SB29

Transaction ID: SB29.6211

006835

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6222

006841

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

A. Doriot for Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 465

City New Paris State IN Zip Code 46553

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB29.6207
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Elect Luke Kenley

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 809

City Noblesville State IN Zip Code 46061

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB29.6209
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Elect Milo Smith State Rep.

Full Name (Last, First, Middle Initial)
Mailing Address 632 3rd Street

City Columbus State IN Zip Code 47201

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB29.6223
Amount of Each Disbursement this Period: 750.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2750.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6207

006831

Form/Schedule: SB29

Transaction ID: SB29.6209

006833

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6223

006842

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

A. Eric Koch for State Rep.

Full Name (Last, First, Middle Initial)
Eric Koch for State Rep.

Mailing Address P.O. Box 372

City Bedford State IN Zip Code 47421

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB29.6210
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Friends of Ed Soliday Comm.

Full Name (Last, First, Middle Initial)
Friends of Ed Soliday Comm.

Mailing Address PO Box 1427

City Valparaiso State IN Zip Code 46384

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB29.6224
Amount of Each Disbursement this Period: 1500.00

Memo Item

C. Hershman for Senate

Full Name (Last, First, Middle Initial)
Hershman for Senate

Mailing Address P.O. Box 177

City Buck Creek State IN Zip Code 47924

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB29.6208
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5000.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6210

006834

Form/Schedule: SB29

Transaction ID: SB29.6224

006843

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6208

006832

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

A. Hoosiers for Scott Pelath

Full Name (Last, First, Middle Initial)

Mailing Address 1824 Manhattan St

City Michigan City State IN Zip Code 46360

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C

Transaction ID : SB29.6216

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Our Community for Casey Cox

Full Name (Last, First, Middle Initial)

Mailing Address 2129 Dodge Avenue

City Fort Wayne State IN Zip Code 46805

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C

Transaction ID : SB29.6204

Amount of Each Disbursement this Period: 500.00

Memo Item

C. Prine for Indiana

Full Name (Last, First, Middle Initial)

Mailing Address 5889 E 250 S

City Franklin State IN Zip Code 46131

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C

Transaction ID : SB29.6218

Amount of Each Disbursement this Period: 750.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2250.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6216

006838

Form/Schedule: SB29

Transaction ID: SB29.6204

006829

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6218

006839

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

A. Washburne for State Rep.

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 127

City Inglefield State IN Zip Code 47618

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB29.6228
 Amount of Each Disbursement this Period: 1000.00

Memo Item

B. www.SteveDavisson.com

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 341

City Salem State IN Zip Code 47167

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB29.6205
 Amount of Each Disbursement this Period: 1000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2000.00 |
| TOTAL This Period (last page this line number only).....▶ | 19500.00 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.6228

006846

Form/Schedule: SB29

Transaction ID: SB29.6205

006830

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **INDIANA FARM BUREAU INC ELECT PAC INC** Transaction ID : **SC/9.6186**

| | | | |
|--|-------------|--|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Steven R Stemler Election Comm | | <input checked="" type="checkbox"/> N <input type="checkbox"/> Memo Item | Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 1001 Penn Street | | | |
| City Jeffersonville | State IN | ZIP Code 47130 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 500.00 | 0.00 | 500.00 |

TERMS

| | | | |
|---|--|-------------------------------|---|
| Date Incurred MM / DD / YYYY 02 / 04 / 2016 | Date Due MM / DD / YYYY 04/30/2016 | Interest Rate 0.00 % (apr) | Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|--|-------------------------------|---|

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 Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer | | |
| Mailing Address | Occupation | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer | | |
| Mailing Address | Occupation | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer | | |
| Mailing Address | Occupation | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|---|--------|
| SUBTOTALS This Period This Page (optional) | 500.00 |
| TOTALS This Period (last page in this line only) | [] |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **INDIANA FARM BUREAU INC ELECT PAC INC** Transaction ID : **SC/9.6273**

| | | | |
|--|-------------|--|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Steven R Stemler Election Comm | | <input checked="" type="checkbox"/> N <input type="checkbox"/> Memo Item | Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 1001 Penn Street | | | |
| City Jeffersonville | State IN | ZIP Code 47130 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| -500.00 | 0.00 | -500.00 |

TERMS

| | | | |
|----------------------------------|------------------------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| MM / DD / YYYY 05 / 05 / 2016 | MM / DD / YYYY 04/30/2016 | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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 Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|---|---------|
| SUBTOTALS This Period This Page (optional) | -500.00 |
| TOTALS This Period (last page in this line only) | 0.00 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.