

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00108613  
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2005 through 04 30 2005

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 Mrs Linda M Buzinec

Signature of Treasurer Electronically Filed by Mrs Linda M Buzinec Date 04 10 2006

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  
Indiana Democratic Congressional Victory Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		192441.01
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period .....	133404.34									
(c) Total Receipts (from Line 19) .....	110972.11	290321.35								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	244376.45	482762.36								
7. Total Disbursements (from Line 31) .....	84765.41	323151.32								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	159611.04	159611.04								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Indiana Democratic Congressional Victory Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	5

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	3250.00	52833.53
(i) Itemized (use Schedule A) .....	31924.00	32434.63
(ii) Unitemized .....	35174.00	85268.16
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	35174.00	85268.16
12. Transfers From Affiliated/Other Party Committees .....	4427.42	4427.42
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) .....	5996.60	22951.17
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	730.08
17. Other Federal Receipts (Dividends, Interest, etc.) .....	36165.00	58380.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	29209.09	118564.52
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	29209.09	118564.52
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	110972.11	290321.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	81763.02	171756.83

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	5154.58	41865.06
(ii) Non-Federal Share.....	29209.09	118564.52
(b) Other Federal Operating Expenditures.....	50401.74	145349.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	84765.41	305779.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	839.63
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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	16532.64
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	16532.64
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	84765.41	323151.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	55556.32	204586.80

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	35174.00	85268.16
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35174.00	85268.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	55556.32	187214.53
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	5996.60	22951.17
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	49559.72	164263.36

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 40
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Greg L. Henneke

Mailing Address 911 N Campbell Ave

City Indianapolis State IN Zip Code 46219

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

Name of Employer American Consulting Occupation engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 5

Transaction ID: SA11A1.46257

Amount of Each Receipt this Period  
500.00

DirMail

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael Levitan

Mailing Address 315 E 72nd St

City Indianapolis State IN Zip Code 46240

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 7 / 2 0 0 5

Transaction ID: SA11A1.46470

Amount of Each Receipt this Period  
250.00

FLYNN

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark S. Moore

Mailing Address 13943 Stonemill Cir E

City Carmel State IN Zip Code 46032

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

Name of Employer Baker & Daniels Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.46271

Amount of Each Receipt this Period  
250.00

DirMail

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 40
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ryan M. Poor

Mailing Address 405 E 43rd St

City Indianapolis State IN Zip Code 46205

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2005

Transaction ID: SA11A1.46517

Amount of Each Receipt this Period  
500.00

Non-event

**B.** Full Name (Last, First, Middle Initial)  
Mr. James A. Schellinger

Mailing Address 1430 E 82nd St

City Indianapolis State IN Zip Code 46240

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

Name of Employer CSO Architect Engineers Occupation Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2005

Transaction ID: SA11A1.46258

Amount of Each Receipt this Period  
500.00

donation

**C.** Full Name (Last, First, Middle Initial)  
Mr. Melvin Simon

Mailing Address 115 W Washington St

City Indianapolis State IN Zip Code 46207

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

Name of Employer Simon Property Group Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2005

Transaction ID: SA11A1.46543

Amount of Each Receipt this Period  
500.00

FLYNN

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 40
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Ann M. Stack

Mailing Address 4131 N Meridian St

City State Zip Code  
Indianapolis IN 46208

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

Name of Employer Occupation  
Publisher Emeritus

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2005

**Transaction ID:** SA11A1.46280

Amount of Each Receipt this Period  
500.00

DirMail

**B.** Full Name (Last, First, Middle Initial)  
Mr. John Richard Turner

Mailing Address 507 Buckingham Dr

City State Zip Code  
Indianapolis IN 46208

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2005

**Transaction ID:** SA11A1.46472

Amount of Each Receipt this Period  
250.00

FLYNN

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3250.00</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 40	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol St. SE

City	State	Zip Code
Washington	DC	20003

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

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4427.42

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	4	/	2	0	0	5

Transaction ID: SA12.50722

Amount of Each Receipt this Period  
4427.42

victory fund

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4427.42
<b>TOTAL</b> This Period (last page this line number only) .....	▶	4427.42

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 40
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Mailing Address 1099 N Meridian St Ste 910

City State Zip Code  
Indianapolis IN 46204

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3762.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2005

Transaction ID: SA15.47639

Amount of Each Receipt this Period  
777.40

Payroll Pre payment

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

Mailing Address 1541 Longworth Building

City State Zip Code  
Washington DC 20515

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5930.21

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2005

Transaction ID: SA15.47636

Amount of Each Receipt this Period  
5219.20

payroll reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5996.60
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5996.60

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 40	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Office of State of Indiana Auditor

Mailing Address 200 W Washington St

City	State	Zip Code
Indianapolis	IN	46204

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

Name of Employer Information Requested	Occupation Information Requested
privatized licensed plate	

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
101490.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	0	5

Transaction ID: SA17.50724

Amount of Each Receipt this Period  

36165.00
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>36165.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>36165.00</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Anthem Blue Cross and Blue Shield</b>		<b>Transaction ID:</b> SB21B.46931 <b>Date of Disbursement</b> MM / DD / YYYY 04 / 22 / 2005
Mailing Address PO Box 790444		Amount of Each Disbursement this Period 4236.87
City Saint Louis      State MO      Zip Code 63179		
Purpose of Disbursement health insurance Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State:      District:		

Full Name (Last, First, Middle Initial) <b>B. Carrie Bales</b>		<b>Transaction ID:</b> SB21B.46933 <b>Date of Disbursement</b> MM / DD / YYYY 04 / 29 / 2005
Mailing Address 706 Hess Ave		Amount of Each Disbursement this Period 1317.88
City Evansville      State IN      Zip Code 47712		
Purpose of Disbursement weinzafpel payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State:      District:		

Full Name (Last, First, Middle Initial) <b>C. Kimberly N Bostic</b>		<b>Transaction ID:</b> SB21B.46908 <b>Date of Disbursement</b> MM / DD / YYYY 04 / 01 / 2005
Mailing Address 6864 W. Philadelphia Drive		Amount of Each Disbursement this Period 1162.42
City McCordsville      State IN      Zip Code 46055		
Purpose of Disbursement payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State:      District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6717.17
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Kimberly N Bostic</b>		<b>Transaction ID:</b> SB21B.46923 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 5
Mailing Address 6864 W. Philadelphia Drive		Amount of Each Disbursement this Period 1137.80
City McCordsville State IN Zip Code 46055	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Kimberly N Bostic</b>		<b>Transaction ID:</b> SB21B.46934 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 5
Mailing Address 6864 W. Philadelphia Drive		Amount of Each Disbursement this Period 1137.80
City McCordsville State IN Zip Code 46055	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ms. Molly E. W Chavers</b>		<b>Transaction ID:</b> SB21B.46912 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5
Mailing Address 1487 Sierra Springs Dr.		Amount of Each Disbursement this Period 1635.35
City Indianapolis State IN Zip Code 46280	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3910.95
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Ms. Molly E. W Chavers</b>		<b>Transaction ID: SB21B.46927</b> Date of Disbursement MM / DD / YYYY 04 / 15 / 2005	
Mailing Address 1487 Sierra Springs Dr.		Amount of Each Disbursement this Period 1635.35	
City Indianapolis State IN Zip Code 46280	Purpose of Disbursement payroll	Category/ Type	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms. Molly E. W Chavers</b>		<b>Transaction ID: SB21B.46938</b> Date of Disbursement MM / DD / YYYY 04 / 29 / 2005	
Mailing Address 1487 Sierra Springs Dr.		Amount of Each Disbursement this Period 1635.35	
City Indianapolis State IN Zip Code 46280	Purpose of Disbursement payroll	Category/ Type	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael D. Edmondson</b>		<b>Transaction ID: SB21B.46909</b> Date of Disbursement MM / DD / YYYY 04 / 01 / 2005	
Mailing Address 1530 E 81st St		Amount of Each Disbursement this Period 2558.36	
City Indianapolis State IN Zip Code 46240	Purpose of Disbursement payroll	Category/ Type	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5829.06</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Michael D. Edmondson</b>		<b>Transaction ID: SB21B.46924</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 5	
Mailing Address 1530 E 81st St		Amount of Each Disbursement this Period 2558.36	
City Indianapolis State IN Zip Code 46240	Purpose of Disbursement payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael D. Edmondson</b>		<b>Transaction ID: SB21B.46935</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 5	
Mailing Address 1530 E 81st St		Amount of Each Disbursement this Period 2558.36	
City Indianapolis State IN Zip Code 46240	Purpose of Disbursement payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. William French</b>		<b>Transaction ID: SB21B.46911</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5	
Mailing Address 5205 E North St		Amount of Each Disbursement this Period 1779.68	
City Indianapolis State IN Zip Code 46219	Purpose of Disbursement payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>6896.40</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. William French</b>		<b>Transaction ID:</b> SB21B.46925 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 5
Mailing Address 5205 E North St		Amount of Each Disbursement this Period 1779.68
City Indianapolis State IN Zip Code 46219	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. William French</b>		<b>Transaction ID:</b> SB21B.46936 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 5
Mailing Address 5205 E North St		Amount of Each Disbursement this Period 1779.68
City Indianapolis State IN Zip Code 46219	Purpose of Disbursement payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Indiana Department of Revenue</b>		<b>Transaction ID:</b> SB21B.46916 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5
Mailing Address 100 N Senate Ave Rm N103		Amount of Each Disbursement this Period 57.56
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement payroll taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3616.92</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Indiana Department of Revenue</b>		<b>Transaction ID:</b> SB21B.46930 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 5
Mailing Address 100 N Senate Ave Rm N103		Amount of Each Disbursement this Period 57.56
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Indiana Department of Revenue</b>		<b>Transaction ID:</b> SB21B.46941 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 5
Mailing Address 100 N Senate Ave Rm N103		Amount of Each Disbursement this Period 57.56
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Internal Revenue Service</b>		<b>Transaction ID:</b> SB21B.46915 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5
Mailing Address Cincinnati Commerce Center		Amount of Each Disbursement this Period 2477.94
City Cincinnati State OH Zip Code 45999	Purpose of Disbursement payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2593.06</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		<b>Transaction ID:</b> SB21B.46929 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 5
Mailing Address Cincinnati Commerce Center		Amount of Each Disbursement this Period 2477.94
City Cincinnati State OH Zip Code 45999	Purpose of Disbursement payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		<b>Transaction ID:</b> SB21B.46940 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 5
Mailing Address Cincinnati Commerce Center		Amount of Each Disbursement this Period 2477.94
City Cincinnati State OH Zip Code 45999	Purpose of Disbursement payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Jewett Printing</b>		<b>Transaction ID:</b> SB21B.46918 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 5
Mailing Address 101 West Ohio St Ste 2000		Amount of Each Disbursement this Period 2106.00
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement printing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7061.88
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Melissa Lear</b>		<b>Transaction ID:</b> SB21B.46914 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5
Mailing Address 627 SE Riverside Dr. # D		Amount of Each Disbursement this Period 1178.24
City Evansville	State IN	
Zip Code 47718		Category/ Type
Purpose of Disbursement carson payroll		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Melissa Lear</b>		<b>Transaction ID:</b> SB21B.46928 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 5
Mailing Address 627 SE Riverside Dr. # D		Amount of Each Disbursement this Period 1083.35
City Evansville	State IN	
Zip Code 47718		Category/ Type
Purpose of Disbursement carson payroll		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Melissa Lear</b>		<b>Transaction ID:</b> SB21B.46939 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 5
Mailing Address 627 SE Riverside Dr. # D		Amount of Each Disbursement this Period 1083.35
City Evansville	State IN	
Zip Code 47718		Category/ Type
Purpose of Disbursement carson payroll		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3344.94
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Daniel J. Parker</b>		<b>Transaction ID:</b> SB21B.46926 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 5
Mailing Address 1502 Shannon Lakes Dr		Amount of Each Disbursement this Period 2497.81
City Indianapolis State IN Zip Code 46217		
Purpose of Disbursement payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Daniel J. Parker</b>		<b>Transaction ID:</b> SB21B.46937 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 5
Mailing Address 1502 Shannon Lakes Dr		Amount of Each Disbursement this Period 2497.81
City Indianapolis State IN Zip Code 46217		
Purpose of Disbursement payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		<b>Transaction ID:</b> SB21B.46922 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 5
Mailing Address 125 W South St Room E-296		Amount of Each Disbursement this Period 5274.38
City Indianapolis State IN Zip Code 46206		
Purpose of Disbursement postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>10270.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>50240.38</b>

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Indiana Democratic State Central Com	M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5	1249.86

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....		1249.86	Transaction ID: H3.50727
<b>ii) Generic Voter Drive</b> .....			Transaction ID:
<b>iii) Exempt Activities</b> .....			Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....			
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....			
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)			Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

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

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

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

NAME OF ACCOUNT Indiana Democratic State Central Com	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 223.36
--	---	------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		223.36
i) Total Administrative .....		Transaction ID: H3.50733
ii) Generic Voter Drive .....		Transaction ID:
iii) Exempt Activities .....		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative) .....	
TOTAL This Period (Generic Voter Drive) .....	
TOTAL This Period (Exempt Activities) .....	
TOTAL This Period (Direct Fundraising) .....	
TOTAL This Period (Direct Candidate Support) .....	
TOTAL This Period (Public Communications Referring Only to Party) .....	
TOTAL This Period (Total Amount Transferred) .....	

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

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

NAME OF ACCOUNT Indiana Democratic State Central Com	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 1215.50
--	---	-------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	1215.50	Transaction ID: H3.50729
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

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

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

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

NAME OF ACCOUNT Indiana Democratic State Central Com	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 14134.84
--	---	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	14134.84	Transaction ID: H3.50735
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

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

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

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

NAME OF ACCOUNT Indiana Democratic State Central Com	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 11400.26
--	---	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	11400.26	Transaction ID: H3.50730
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

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

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

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

NAME OF ACCOUNT Indiana Democratic State Central Com	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 985.27
--	---	------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	985.27	Transaction ID: H3.50731
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	29209.09
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	29209.09

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> PrimePay			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9382 Priority Way West Dr			Allocated Activity or Event Year-To-Date 126167.42		
City	State	Zip Code	Category/ Type		
Indianapolis	IN	46240			
Purpose of Disbursement: payroll service			Date <input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.46942		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.23		86.28		101.51

<b>B. Full Name (Last, First, Middle Initial)</b> National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O Box 856176			Allocated Activity or Event Year-To-Date 126803.61		
City	State	Zip Code	Category/ Type		
LOUISVILLE	KY	40285			
Purpose of Disbursement: travel			Date <input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.46943		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.43		540.76		636.19

<b>C. Full Name (Last, First, Middle Initial)</b> Expedia			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 13810 SE Eastgate Way Sute 400			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Category/ Type		
Bellevue	WA	98005			
Purpose of Disbursement: travel service			Date <input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.47624		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.75		4.25		5.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.66		627.04		737.70

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

**A. Full Name (Last, First, Middle Initial)**  
Residence Inns

Mailing Address  
4919 Lima Road

City Fort Wayne	State IN	Zip Code 46808	Category/ Type
Purpose of Disbursement: travel			

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

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

Allocated Activity or Event Year-To-Date  
0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	1	/	2	0	0	5

  
**Transaction ID:** H4.47625

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.64		337.96		397.60

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

Mailing Address  
www.aa.com

City Tulsa	State OK	Zip Code 74133	Category/ Type
Purpose of Disbursement: travel			

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

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

Allocated Activity or Event Year-To-Date  
0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	1	/	2	0	0	5

  
**Transaction ID:** H4.47626

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.97		169.83		199.80

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

Mailing Address  
P.O Box 856176

City LOUISVILLE	State KY	Zip Code 40285	Category/ Type
Purpose of Disbursement:			

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

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

Allocated Activity or Event Year-To-Date  
0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	1	/	2	0	0	5

  
**Transaction ID:** H4.47627

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.07		28.73		33.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O Box 856176			Allocated Activity or Event Year-To-Date 127536.34		
City LOUISVILLE	State KY	Zip Code 40285	Date MM / DD / YYYY 04 / 01 / 2005		
Purpose of Disbursement: office			Transaction ID: H4.46944		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.91		622.82		732.73

<b>B. Full Name (Last, First, Middle Initial)</b> Paradise Bakery			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14550 Clay Terrace Suite 100			Allocated Activity or Event Year-To-Date 0.00		
City Carmel	State IN	Zip Code 46032	Date MM / DD / YYYY 04 / 01 / 2005		
Purpose of Disbursement: catering			Transaction ID: H4.47628		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.20		182.47		214.67

<b>C. Full Name (Last, First, Middle Initial)</b> Dell Account			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9020			Allocated Activity or Event Year-To-Date 0.00		
City Des Moines	State IA	Zip Code 50368	Date MM / DD / YYYY 04 / 01 / 2005		
Purpose of Disbursement: computers			Transaction ID: H4.47630		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.70		253.30		298.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.91		622.82		732.73

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> anchor computer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address http://www.anchorcomputer.com/			Allocated Activity or Event Year-To-Date [0.00]		
City Indianapolis	State IN	Zip Code 46204	Date M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5		
Purpose of Disbursement: computer			Transaction ID: H4.47631		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[19.99]		[113.27]		[133.26]

<b>B. Full Name (Last, First, Middle Initial)</b> Broad Ripple Trophy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 910 Broad Ripple Ave			Allocated Activity or Event Year-To-Date [0.00]		
City Indianapolis	State IN	Zip Code 46220	Date M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5		
Purpose of Disbursement: office supplies			Transaction ID: H4.47633		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[3.57]		[20.23]		[23.80]

<b>C. Full Name (Last, First, Middle Initial)</b> National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O Box 856176			Allocated Activity or Event Year-To-Date [0.00]		
City LOUISVILLE	State KY	Zip Code 40285	Date M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5		
Purpose of Disbursement: bank fees			Transaction ID: H4.50726		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[9.45]		[53.55]		[63.00]

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

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

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[ ]	[ ]	[ ]

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Dell Financial Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 5292			Allocated Activity or Event Year-To-Date 127612.33																						
City	State	Zip Code	Category/ Type																						
Carol Stream	IL	60197																							
Purpose of Disbursement: computer supplies			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	4	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	0	4	/	2	0	0	5																
Activity or Event Identifier: Administrative			Transaction ID: H4.46945																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.40		64.59		75.99

<b>B. Full Name (Last, First, Middle Initial)</b> National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O Box 856176			Allocated Activity or Event Year-To-Date 127799.12																						
City	State	Zip Code	Category/ Type																						
LOUISVILLE	KY	40285																							
Purpose of Disbursement: credit card payment			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	4	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	0	4	/	2	0	0	5																
Activity or Event Identifier: Administrative			Transaction ID: H4.46946																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.02		158.77		186.79

<b>C. Full Name (Last, First, Middle Initial)</b> Denison Parking			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 36 S Pennsylvania St Ste 200			Allocated Activity or Event Year-To-Date 129229.12																						
City	State	Zip Code	Category/ Type																						
Indianapolis	IN	46204																							
Purpose of Disbursement: parking			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	0	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	0	/	2	0	0	5																
Activity or Event Identifier: Administrative			Transaction ID: H4.46947																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
214.50		1215.50		1430.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
253.92		1438.86		1692.78

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 790406			Allocated Activity or Event Year-To-Date 130144.36																						
City Saint Louis	State MO	Zip Code 63179	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	5	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	5	/	2	0	0	5																
Purpose of Disbursement: phones			Category/ Type																						
Activity or Event Identifier: Administrative			Transaction ID: H4.46948																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
137.29		777.95		915.24

<b>B. Full Name (Last, First, Middle Initial)</b> Gibson Insurance Agency, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 610			Allocated Activity or Event Year-To-Date 131764.36																						
City Plymouth	State IN	Zip Code 46563	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	5	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	5	/	2	0	0	5																
Purpose of Disbursement: liability insurance			Category/ Type																						
Activity or Event Identifier: Administrative			Transaction ID: H4.46949																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
243.00		1377.00		1620.00

<b>C. Full Name (Last, First, Middle Initial)</b> Gibson Insurance Agency, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 610			Allocated Activity or Event Year-To-Date 132172.36																						
City Plymouth	State IN	Zip Code 46563	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	5	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	4	/	1	5	/	2	0	0	5																
Purpose of Disbursement: liability insurance			Category/ Type																						
Activity or Event Identifier: Administrative			Transaction ID: H4.46950																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.20		346.80		408.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
441.49		2501.75		2943.24

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> PrimePay			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9382 Priority Way West Dr			Allocated Activity or Event Year-To-Date 132422.51		
City Indianapolis	State IN	Zip Code 46240	Date MM / DD / YYYY 04 / 15 / 2005		
Purpose of Disbursement: payroll service			Transaction ID: H4.46951		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.52		212.63		250.15

<b>B. Full Name (Last, First, Middle Initial)</b> The Conference Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 254 Chapman Road, Topkis Building			Allocated Activity or Event Year-To-Date 132570.55		
City Newark	State DE	Zip Code 19702	Date MM / DD / YYYY 04 / 15 / 2005		
Purpose of Disbursement: phone services			Transaction ID: H4.46952		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.21		125.83		148.04

<b>C. Full Name (Last, First, Middle Initial)</b> LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 2314			Allocated Activity or Event Year-To-Date 133027.55		
City Carol Stream	State IL	Zip Code 60132	Date MM / DD / YYYY 04 / 15 / 2005		
Purpose of Disbursement: legal service			Transaction ID: H4.46953		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.55		388.45		457.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
128.28		726.91		855.19

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> SBC Long Distance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 660688			Allocated Activity or Event Year-To-Date 133166.72		
City Dallas	State TX	Zip Code 75266	Date <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: phones			Transaction ID: H4.46954		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.88		118.29		139.17

<b>B. Full Name (Last, First, Middle Initial)</b> Advance Printing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2260 Profit Dr			Allocated Activity or Event Year-To-Date 134203.05		
City Indianapolis	State IN	Zip Code 46241	Date <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: printing			Transaction ID: H4.46955		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.45		880.88		1036.33

<b>C. Full Name (Last, First, Middle Initial)</b> SBC Capital Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 13160 Collections Center Drive			Allocated Activity or Event Year-To-Date 134744.76		
City Chicago	State IL	Zip Code 60693	Date <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: phone services			Transaction ID: H4.46956		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.26		460.45		541.71

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
257.59		1459.62		1717.21

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 4723			Allocated Activity or Event Year-To-Date 134816.54		
City Houston	State TX	Zip Code 77210	Date MM / DD / YYYY 04 / 15 / 2005		
Purpose of Disbursement: delivery service			Transaction ID: H4.46957		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.77		61.01		71.78

<b>B. Full Name (Last, First, Middle Initial)</b> Voter Activation Network LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 54 Regent St			Allocated Activity or Event Year-To-Date 137116.54		
City Cambridge	State MA	Zip Code 02140	Date MM / DD / YYYY 04 / 15 / 2005		
Purpose of Disbursement: voter file service maintenance			Transaction ID: H4.46958		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
345.00		1955.00		2300.00

<b>C. Full Name (Last, First, Middle Initial)</b> Time Warner Cable			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 741855			Allocated Activity or Event Year-To-Date 137189.34		
City Cincinnati	State OH	Zip Code 45274	Date MM / DD / YYYY 04 / 15 / 2005		
Purpose of Disbursement: cable			Transaction ID: H4.46959		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.92		61.88		72.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
366.69		2077.89		2444.58

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Storage USA			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 501 Fulton St			Allocated Activity or Event Year-To-Date 137420.33		
City Indianapolis	State IN	Zip Code 46202	Date <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: storage			Transaction ID: H4.46960		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.65		196.34		230.99

<b>B. Full Name (Last, First, Middle Initial)</b> IKON Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 740541			Allocated Activity or Event Year-To-Date 139371.79		
City Atlanta	State GA	Zip Code 30374	Date <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: office equipment rental			Transaction ID: H4.46961		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
292.72		1658.74		1951.46

<b>C. Full Name (Last, First, Middle Initial)</b> Jewett Printing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 West Ohio St Ste 2000			Allocated Activity or Event Year-To-Date 145584.17		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: printing			Transaction ID: H4.46962		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
931.86		5280.52		6212.38

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1259.23		7135.60		8394.83

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> AquaPerfect, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5684 W 74th St			Allocated Activity or Event Year-To-Date 145808.37		
City Indianapolis	State IN	Zip Code 46278	Date <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: water			Transaction ID: H4.46963		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.63		190.57		224.20

<b>B. Full Name (Last, First, Middle Initial)</b> OneNation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address L-2099			Allocated Activity or Event Year-To-Date 145858.37		
City Columbus	State OH	Zip Code 43260	Date <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: cobra			Transaction ID: H4.46964		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		42.50		50.00

<b>C. Full Name (Last, First, Middle Initial)</b> DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 4723			Allocated Activity or Event Year-To-Date 145921.28		
City Houston	State TX	Zip Code 77210	Date <input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: delivery service			Transaction ID: H4.46965		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.44		53.47		62.91

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.57		286.54		337.11

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> SBC Ameritech			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Bill Payment Center			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">145969.77</div>	
City	State	Zip Code	Category/ Type	
Chicago	IL	60663		
Purpose of Disbursement: phones			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 4 / 2 2 / 2 0 0 5 <b>Transaction ID:</b> H4.46966	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.27		41.22		48.49

<b>B. Full Name (Last, First, Middle Initial)</b> Duke Realty Corporation			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 75 Remittance Dr Dept 3205			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">158754.12</div>	
City	State	Zip Code	Category/ Type	
Chicago	IL	60675		
Purpose of Disbursement: rent			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 4 / 2 2 / 2 0 0 5 <b>Transaction ID:</b> H4.46967	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1917.65		10866.70		12784.35

<b>C. Full Name (Last, First, Middle Initial)</b> AquaPerfect, Inc.			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5684 W 74th St			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">158807.12</div>	
City	State	Zip Code	Category/ Type	
Indianapolis	IN	46278		
Purpose of Disbursement: water			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 4 / 2 2 / 2 0 0 5 <b>Transaction ID:</b> H4.46968	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.95		45.05		53.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1932.87		10952.97		12885.84

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Skyline Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 American Sq Fl 36			Allocated Activity or Event Year-To-Date 158870.45		
City Indianapolis	State IN	Zip Code 46282	Date MM / DD / YYYY 04 / 22 / 2005		
Purpose of Disbursement: dues			Transaction ID: H4.46969		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.50		53.83		63.33

<b>B. Full Name (Last, First, Middle Initial)</b> Sandler & Reiff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 E St SE Ste 300			Allocated Activity or Event Year-To-Date 159270.45		
City Washington	State DC	Zip Code 20003	Date MM / DD / YYYY 04 / 22 / 2005		
Purpose of Disbursement: retainer			Transaction ID: H4.46970		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00		340.00		400.00

<b>C. Full Name (Last, First, Middle Initial)</b> Duke Realty Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 75 Remittance Dr Dept 3205			Allocated Activity or Event Year-To-Date 160429.58		
City Chicago	State IL	Zip Code 60675	Date MM / DD / YYYY 04 / 27 / 2005		
Purpose of Disbursement: operating expenses			Transaction ID: H4.46971		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.87		985.26		1159.13

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
243.37		1379.09		1622.46

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
5154.58		29209.09		34363.67

Form/Schedule: **F3XA**

Transaction ID:

In reference to you letter dated November 23, 2005 concerning the May monthly report. 1. the Julia Carson for Congress Committee just recently joined our payroll in April 2005 and thus there were no prior disbursement to or on behalf of The Committee. 2. The payments for postage and printing were not for anything that clearly identified a candidate nor did it attack, support or oppose any candidate. 3. Schedule H4 has been corrected there was an importing error. 4. categories for financial activity has been corrected. In reference to your letter dated March 10, 2006, the additional receipts and disclosures are the state portion of items paid on a split. Due to an importing error that has now been corrected the report did not adequately report the state portion of the transaction in the original report.

Form/Schedule: **SA17**

Transaction ID: **SA17.50724**

funds from the Auditor of Indiana reflect payment from individuals who purchase personalized licence plates, which, by state law, are forwarded to the political party whose plates are selected. It is our understanding that these are permissible federal dollars.