

# 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

OORAH! POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO BOX 1053

Check if different than previously reported. (ACC)

BLOOMINGTON IN 47402

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00551853

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 M M M / D D D / Y Y Y Y Y Y in the State of  

(d) 30-Day POST-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2018 through M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

WUSLICH, JEFF, , ,

Type or Print Name of Treasurer

Signature of Treasurer WUSLICH, JEFF, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2018

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

**OORAH! POLITICAL ACTION COMMITTEE**

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="2018"/>		202548.96
(b) Cash on Hand at Beginning of Reporting Period.....	51949.32	
(c) Total Receipts (from Line 19) .....	12000.00	270752.45
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	63949.32	473301.41
7. Total Disbursements (from Line 31).....	34413.01	443765.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	29536.31	29536.31
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**OORAH! POLITICAL ACTION COMMITTEE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	0.00	40500.00
(ii) Unitemized .....	0.00	25.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	0.00	40525.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	12000.00	166000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	12000.00	206525.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	48444.95
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	782.50
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	15000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	12000.00	270752.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	12000.00	270752.45

**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 .....	16413.01	196265.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	16413.01	196265.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	240500.00
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.....	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 (Including Non-Federal Donations).....	6000.00	7000.00
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)) ..	34413.01	443765.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34413.01	443765.10

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12000.00	206525.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12000.00	206525.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	16413.01	196265.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	782.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16413.01	195482.60

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. BECTON, DICKINSON AND COMPANY PAC**

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

Mailing Address 1 BECTON DR. MC085

City FRANKLIN LAKES	State NJ	Zip Code 07417-1815
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00376582

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2018

**Transaction ID : SA11C.40114**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B. CHARTER COMMUNICATIONS, INC. PAC**

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

Mailing Address 400 ATLANTIC STREET  
10TH FLOOR

City STAMFORD	State CT	Zip Code 06901-3512
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00426775

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2018

**Transaction ID : SA11C.40110**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. ELI LILLY AND COMPANY PAC**

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

Mailing Address LILLY CORPORATE CENTER

City INDIANAPOLIS	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00082792

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2018

**Transaction ID : SA11C.40117**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. NACD RESPONSIBLE DISTRIBUTION PAC**

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

Mailing Address 1560 WILSON BOULEVARD  
SUITE 1100

City ARLINGTON State VA Zip Code 22209-2442

FEC ID number of contributing federal political committee. **C** C00379180

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2018

**Transaction ID : SA11C.40118**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA PAC**

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

Mailing Address 950 F STREET NW  
SUITE 300

City WASHINGTON State DC Zip Code 20004-1440

FEC ID number of contributing federal political committee. **C** C00021972

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2018

**Transaction ID : SA11C.40113**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C. PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA PAC**

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

Mailing Address 8700 WEST BRYN MAWR, STE. 1200S

City CHICAGO State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C** C00066472

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2018

**Transaction ID : SA11C.40115**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	12000.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I8425

Amount of Each Disbursement this Period: 292.20

Memo Item

**B. BROGHAMER CONSULTING LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 411 WALNUT STREET PMB 300

City GREEN COVE SPRINGS State FL Zip Code 32043-2006

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I8413

Amount of Each Disbursement this Period: 1504.69

Memo Item

**C. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I8422

Amount of Each Disbursement this Period: 125.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1921.89

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



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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LIMESTONE STRATEGIES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

Mailing Address 5975 CASTLE CREEK PKWY N DR  
SUITE 475

City INDIANAPOLIS State IN Zip Code 46250-4346

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

FEC Identification Number

C

Transaction ID : SB21B.I8410

Amount of Each Disbursement this Period

5000.00

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. MIGHT AND MAIN, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

Mailing Address 1821 E RUBY LANE

City BLOOMINGTON State IN Zip Code 47401-6054

Purpose of Disbursement  
FINANCE CONSULTING

FEC Identification Number

C

Transaction ID : SB21B.I8408

Amount of Each Disbursement this Period

1000.00

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. O'DONNELL AND ASSOCIATES, LTD.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

FEC Identification Number

C

Transaction ID : SB21B.I8414

Amount of Each Disbursement this Period

2500.00

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

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

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

8500.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. SOCKO STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2018	
Mailing Address 2438 TUNLAW ROAD NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I8325</b> Amount of Each Disbursement this Period 2500.00	
City WASHINGTON	State DC	Zip Code 20007	Category/ Type
Purpose of Disbursement FINANCE CONSULTING		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>B. SOCKO STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018	
Mailing Address 2438 TUNLAW ROAD NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I8415</b> Amount of Each Disbursement this Period 2950.00	
City WASHINGTON	State DC	Zip Code 20007	Category/ Type
Purpose of Disbursement FINANCE CONSULTING		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018	
Mailing Address 8909 PURDUE ROAD, SUITE 400		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I8423</b> Amount of Each Disbursement this Period 440.40	
City INDIANAPOLIS	State IN	Zip Code 46268-3149	Category/ Type
Purpose of Disbursement TRAVEL		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5890.40
<b>TOTAL</b> This Period (last page this line number only).....▶	16312.29

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. CATHY MCMORRIS RODGERS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

Mailing Address BOX 137

FEC Identification Number

C	C00390476
---	-----------

City SPOKANE State WA Zip Code 99210

**Transaction ID : SB23.I8418**

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Amount of Each Disbursement this Period

2000.00
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Candidate Name

**MCMORRIS RODGERS, CATHY, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: WA District: 05

Memo Item

Full Name (Last, First, Middle Initial)  
**B. LOU BARLETTA FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

Mailing Address PO BOX 128

FEC Identification Number

C	C00445122
---	-----------

City HAZLETON State PA Zip Code 18201

**Transaction ID : SB23.I8420**

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name

**BARLETTA, LOU, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: PA District:

Memo Item

Full Name (Last, First, Middle Initial)  
**C. WALORSKI FOR CONGRESS INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

Mailing Address PO BOX 954

FEC Identification Number

C	C00468579
---	-----------

City MISHAWAKA State IN Zip Code 46546

**Transaction ID : SB23.I8409**

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name

**WALORSKI, JACKIE, SWIHART, ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: IN District: 02

Memo Item

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

12000.00
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**TOTAL** This Period (last page this line number only)..... ▶

12000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CITIZENS FOR MERRITT</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018	
Mailing Address 4134 N. ILLINOIS		FEC Identification Number C [ ] <b>Transaction ID : SB29.I8417</b>	
City INDIANAPOLIS	State IN	Zip Code 46208	Amount of Each Disbursement this Period [ ] 2000.00
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. COMMITTEE TO ELECT JON FORD</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018	
Mailing Address 48 GREENHAVEN CT		FEC Identification Number C [ ] <b>Transaction ID : SB29.I8419</b>	
City TERRE HAUTE	State IN	Zip Code 47802	Amount of Each Disbursement this Period [ ] 1000.00
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF CONNIE LAWSON</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018	
Mailing Address 133 W MARKET STREET # 196		FEC Identification Number C [ ] <b>Transaction ID : SB29.I8412</b>	
City INDIANAPOLIS	State IN	Zip Code 46204-2801	Amount of Each Disbursement this Period [ ] 1000.00
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4000.00
<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 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF TERA KLUTZ**

Mailing Address 101 W. OHIO STREET SUITE 2200

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 09 / 2018

FEC Identification Number

Transaction ID : SB29.I8416

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. KELLY FOR INDIANA**

Mailing Address PO BOX 3114

City INDIANAPOLIS State IN Zip Code 46206-3114

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

/  /   
10 / 09 / 2018

FEC Identification Number

Transaction ID : SB29.I8411

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

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)..... ▶

6000.00