REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

C00224576 091694
~~SHERYL D ENGT~~ MARGARET M. McKINNEY
INDIANAPOLIS LIFE INSURANCE CO
MPANY POLITICAL ACTION COMMITT
2960 NORTH MERIDIAN STREET
PO BOX 1230
INDIANAPOLIS IN 46206

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM
DEC 2 12 35 PM '96

2. FEC IDENTIFICATION NUMBER
C00224576

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____

☒ Thirtieth day report following the General Election on 11/05/96 in the State of Indiana

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/1/96 through 11/25/96		
6. (a) Cash on Hand January 1, 19 96		$ 3542.50
(b) Cash on Hand at Beginning of Reporting Period	$ 2092.94	
(c) Total Receipts (from Line 18)	$ 556.74	$ 4107.18
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 2649.68	$ 7649.68
7. Total Disbursements (from Line 30)	$ 0.00	$ 5000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 2649.68	$ 2649.68
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Margaret M. McKinney

Signature of Treasurer
Margaret M McKinney

Date
11/26/96

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

FEC FORM 3X
(revised 9/93)

FE6AN103

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE Indianapolis Life Insurance Company Political Action Committee C00224576

REPORT COVERING PERIOD FROM 10/1/96 TO 11/25/96

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	556.74	4107.18	11(a)(i)
ii. Unitemized	0.00	0.00	11(a)(ii)
iii. Total (add i and ii) ➤	556.74	4107.18	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	556.74	4107.18	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	556.74	4107.18	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	556.74	4107.18	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	5000.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:	0.00	0.00	
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0.00	0.00	28(d)
29. Other Disbursements	0.00	0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	0.00	5000.00	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	0.00	5000.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	556.74	4107.18	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	556.74	4107.18	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0.00	0.00	37

FE6AN136

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 03 OF 07

FOR LINE NUMBER 11ai

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)
INDIANAPOLIS LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE #C00224576

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Larry R. Prible 12443 Pebblepointe Pass Carmel, IN 46033 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation: President and CEO Aggregate Year-to-Date > $ 210.00	twice monthly payroll deduction	$10.00 per pay period. $30.00 this reporting period
B. William L. Boyd 8126 Halyard Way Indianapolis, IN 46231 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Sr. Vice Pres. Compliance Aggregate Year-to-Date > $ 105.00	twice monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
C. Andrew C. Emerson 5671 Central Avenue Indianapolis, IN 46220 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Vice President & General Counsel Aggregate Year-to-Date > $ 150.00	twice monthly payroll deduction	$15.00 per pay period. $0.00 this reporting period
D. J. Jack Fahrenbach 5405 N 150 W Lebanon, IN 46052 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Sr. Vice Pres. & Chief Financial Off. Aggregate Year-to-Date > $ 105.00	twice monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
E. Norma L. Carter 647 Morningside Court Zionsville, IN 46077 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Vice President Sales Aggregate Year-to-Date > $ 105.00	twice monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
F. Gene Trueblood 6570 Forrest Commons Blvd. Indianapolis, IN 46227 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Vice President Securities & Treas. Aggregate Year-to-Date > $ 105.00	twice monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
G. Jay J. Neal 9230 E. 25th Street Indianapolis, IN 46229 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Vice President Client Services Aggregate Year-to-Date > $ 174.93	twice monthly payroll deduction	$8.33 per pay period. $24.99 this reporting period

SUBTOTAL of Receipts This Page (optional) 114.99

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 04 OF 07

FOR LINE NUMBER 11ai

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)

INDIANAPOLIS LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE #C00224576

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Larry A. Halbach 8341 Catamaran Drive Indianapolis, IN 46236 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation Vice President Insurance Services Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Wesley M. McDivitt 2092 Lake Run Drive Greenwood, IN 46143 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation Vice President Mortgage Loan Aggregate Year-to-Date > $ 131.25	twice-monthly payroll deduction	$6.25 per pay period. $18.75 this reporting period
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Karla K. Vest 6944 N. County Road 201E Pittsboro, IN 46167-9498 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation Vice President Corporate & Human Ser. Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jonathan A. Canine 13207 Abbots Place Carmel, IN 46032 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation Sr. Vice Pres. & Chief Actuary Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert J. Schnell 602 Watterson Court Indianapolis, IN 46217 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation Vice President Underwriting & Claims Aggregate Year-to-Date > $ 126.00	twice-monthly payroll deduction	$6.00 per pay period. $18.00 this reporting period
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Margaret M. McKinney 6828 Bloomfield Drive Indianapolis, IN 46259 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation Assoc. General Counsel & Secretary Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Peter Kornys 1914 Hunters Ridge Lane Greenwood, IN 46143 Receipt For: ☐ Primary ☐ General ☐ Other (specify): n/a	Indianapolis Life Insurance Company Occupation Associate Actuary Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period

SUBTOTAL of Receipts This Page (optional) 111.75

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

FE4AN1C1

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11ai

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)
INDIANAPOLIS LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE #C00224576

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ed Burns 745 Lockefield Street #J Indianapolis, IN 46202 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Assistant Actuary Aggregate Year-to-Date > $ $65.00	twice-monthly payroll deduction	$5.00 per pay period. $0.00 this reporting period
John Shawhan 7447 Somerset Lane, Apt. D Indianapolis, IN 46240 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Manager Insurance Services Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
Don A. Robinson 1579 Woodside Drive Danville, IN 46122 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Manager Insurance Services Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
Ed W. Endzel 708 MeadowView Lane Greenwood, IN 46142 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Manager, Corporate Services Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
Tamra E. Godme 218 Black Maple Court Greenwood, IN 46142 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Manager, Investment Accounting Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
Mark D. Novotney 8333 Rahke Road Indianapolis, IN 46217 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: VP GMgr/Term Aggregate Year-to-Date > $ 210.00	twice-monthly payroll deduction	$10.00 per pay period. $30.00 this reporting period
Bonnie L. Klingler 5999 S. 700 E Zionsville, IN 46077 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Manager Client Services Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period

SUBTOTAL of Receipts This Page (optional) > 105.00

TOTAL This Period (last page this line number only) >

FEAN101

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11ai

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)

INDIANAPOLIS LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE #C00224576

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Curtis R. Speer 889 Richart Lane Greenwood, IN 46142 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Chief Underwriter Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
B. Patricia L. Scanlon 9031 Panorama Court Indianapolis, IN 46234 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Manager New Business Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
C. Gregory J. Carney 8705 Sturgeon Bay Lane Indianapolis, IN 46236 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Sr. Vice Pres, Gen. Mgr. Annuities Aggregate Year-to-Date > $ 210.00	twice-monthly payroll deduction	$10.00 per pay period. $30.00 this reporting period
D. Linda M. Krevda 10550 Brecken Ridge Drive Carmel, IN 46033 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Vice President Corp. Communications Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
E. Garrett P. Ryan 1641 E. 151st Street Carmel, IN 46032 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Sr. Vice President Marketing Aggregate Year-to-Date > $ 210.00	twice-monthly payroll deduction	$10.00 per pay period. $30.00 this reporting period
F. Lawrence Bunting 10111 N. Guildford Avenue Indianapolis, IN 46280 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Sr. Systems prg. Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period
G. Gail K. Eastburn 11116 Moss Drive Carmel, IN 46032 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Sr. Analyst Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period $15.00 this reporting period

SUBTOTAL of Receipts This Page (optional) 135.00

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

FESA1066

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11ai

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)
INDIANAPOLIS LIFE INSURANCE COMPANY POLITICAL ACTION COMMMITTEE #C00224576

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Steven Caress 7131 Lakeside Woods Drive Indianapolis, IN 46278 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Sr. Asst. Acty. Aggregate Year-to-Date > $ 40.00	twice-monthly payroll deduction	$5.00 per pay period $0.00 this reporting period
B. Tammy Storm 3590 Elm Swamp Road Lebanon, IN 46052 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Securities Asst. Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period $15.00 this reporting period
C. Barbara Somes 109 Carmelaire Drive Carmel, IN 46032 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Acct. Rep. Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period $15.00 this reporting period
D. Rita Runyan 7640 Singleton Street Indianapolis, IN 46227 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period $15.00 this reporting period
E. Ross Meyer 10091 Barth Drive Zionsville, IN 46077 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: VP TCH IL Term Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period $15.00 this reporting period
F. Grant Hemphill 5765 Lincoln Road Martinsville, IN 46151 Receipt For: Primary / General / Other (specify):	Indianapolis Life Insurance Company Occupation: VP ACT IL Term Aggregate Year-to-Date > $ 105.00	twice-monthly payroll deduction	$5.00 per pay period $15.00 this reporting period
G. Karen Delgado 4800 Little Hurricane Road Martinsville, IN 46151 Receipt For: Primary / General / Other (specify): n/a	Indianapolis Life Insurance Company Occupation: VP New Business Aggregate Year-to-Date > $ 60.00	Twice-monthly payroll deduction	$5.00 per pay period. $15.00 this reporting period

SUBTOTAL of Receipts This Page (optional) 90.00

TOTAL This Period (last page this line number only) 556.74

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 11-26-96
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

PREPARER: [illegible] DATE PREPARED: 12-2-96

FEC FORM 70-2 (12/92)