F	FE( ORM		A	١D	ORT O DISBU Than An	JRSE	MENT	s		RECEI MAIL DE <b>G</b> IL=7,	CEN	
	NAME O COMMIT	F TEE (in ful		PE OR	PRINT V		mple: If typ r the lines.	ng, type	12FE4M			
	NPILI	ANA	CHAM	IN E	Ri Co	NIGIBIEI	5   5   1   0  .	VIALLIA	1_6171110	1 <b>1/</b> 111		
610		ITITE	L <b>E</b> L_L_L	11						<del>↓↓_↓</del>	<u> </u>	
ADD	RESS (ni	umber and s	street)	115	<u> </u>	<u>A 1 5 1 H 1 1 1 1</u>	V161T101	<u>N 15 [];</u>	ISIVIJT	<u>  E    &amp; </u>	505	
•	than	ck if differe previously rted. (ACC		<u>.</u> 	<u> </u>	<u>Pio:L11</u>	· · · · · · ·			<u> </u>  4 <sub> </sub>	<u> </u>	
2.	FEC IDE		ION NUME	ER 🔻		CITY 🔺			STATE 🔺	:	ZIP COI	DE 🔺
	°C <i>o</i> ≖	040	559	7	:	3. IS THIS REPORT	•	NEW (N) <b>OR</b>	• ` Al (A	MENDED .)		
4.	(Choose	terly Repor April 15 Quarterly F July 15 Quarterly F Quarterly F January 31	ts: Report (Q1) Report (Q2) Report (Q3) Report (YE) d-Year on-election (MY)		12-Day PRE-Electio Report for th 30-Day POST-Electi Report for th	ne:	Primary (12 Convention	(12C) <sup>D</sup> D / G)	Sep	(12S) 	in the State o	Special (30S)
I cer Type Sign	e or Print ature of <sup>-</sup>	have exar Name of 1 Freasurer	I .0 .		ff Bra	st of my kno		belief it is tri		nd complet	e.	J.O. 1 6
	Offi Us Or	ice se								FEC		М 3Х

	- FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
~	Irite or Type Committee Name	· · · · · · · · · · · · · · · · · · ·	
	Indiana Chamber 10	ingressional Action (	ommittee
R	eport Covering the Period: From:	1 M / D D / Y Y Y Y	M M / D D / Y Y Y O: 11 Z & Z016
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		, 1.1,8.11.9.0
	(b) Cash on Hand at Beginning of Reporting Period	17291,901	
	(c) Total Receipts (from Line 19)	*** , , <b>,</b> •	, 2,500.00
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	1.329 19.0	14,311.90
7.	Total Disbursements (from Line 31)		
8.	Cash cn Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, 13,291.90	, 13,291,90
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	<b>••••</b>	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	þ.	

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

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	DETAILED SUMMARY PAGE of Receipts	7
FEC Form 3X (Rev. 05/2016)		Page 3
Write or Type Committee Name		
Turtique Chamber	angressional Hetion (on	mittee
Report Covering the Period: From: I	0; 20 2016 To	D. 29 2016
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	d and a second sec	
(ii) Unitemized	$\mathbf{y}_{1} = \mathbf{y}_{2} + \mathbf{y}_{1} = \mathbf{y}_{2} + \mathbf{y}_{1} + \mathbf{y}_{2} + \mathbf{y}_{1} + \mathbf{y}_{2} $	at " " and a start at a start and
(iii) TOTAL (add	<i>d</i>	250000
Lines 11(a)(i) and (ii)▶	· · · · · · · · · · · · · · · · · · ·	
(b) Political Party Committees	$, , , , , \varphi$	The second se
(c) Other Political Committees		لې کې د د د د د د د د د د د د د د د د د د
(such as PACs)	,,,, <b>,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	$\sim$ is the set of the set of the $P$ .
<ul><li>(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry</li></ul>		معجوب والمتعامين والمتعاد المعاد المعا
Totals to Line 33, page 5)	$\phi$ .	750000
12. Transfers From Affiliated/Other	• • • • • • • • • • • • • • • • • • •	
Party Committees	Ø	Ø
		المحمد المحمد المستخلص في المحمد ا المحمد المحمد
13. All Loans Received	· · · · · · · · · · · · · · · · · · ·	0
14. Loan Repayments Received	$\varphi$	P
15. Offsets To Operating Expenditures		من معمد من من الله الله المن الله المن الله الله الله الله الله الله الله الل
(Refunds, Rebates, etc.)	and the second	R .
(Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made	$\cdots \cdots \varphi$	
to Federal Candidates and Other		
Political Committees	· d	Ø 1
17. Other Federal Receipts		المسلك الألاية ( يعمال من من الالتكامية ). يو يود الم
(Dividends, Interest, etc.)	<i>. Ø</i>	Ø
18. Transfers from Non-Federal and Levin Fund	s , , , , , , , , , , , , , , , , , , ,	
(a) Non-Federal Account		ana sa ka ka ka ka ka marangan sa ka
(from Schedule H3)	, , . ${oldsymbol arphi}$	, , , , , , , , , , , , , , , , , , , ,
	• K	چ امرسطسانیه، بالیانین سولیت، ای بالیانی دا <b>کم</b>
(b) Levin Funds (from Schedule H5)	a some mer a Par	a sector the trade state of a construction of the sector o
(c) Total Transfers (add 18(a) and 18(b))	···· A	
	, , <b>, , , , , , , , , , , , , , , , , </b>	μ - γ· ·
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	· · ·	
	· · · · · · · · · · · · · · · · · · ·	
20. Total Federal Receipts	بريعه بارضي بربا الجاري رادام	ومربق علومهوده وللجاري الدادية الجاديهمها كالحاج
(subtract Line 18(c) from Line 19)▶	LAFT BLAS GER DECOMPANY	00005,50

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## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4 COLUMN B Calendar Year-to-Date			
II. Disbursements	COLUMN A Total This Period				
<ul> <li>21. Operating Expenditures:         <ul> <li>(a) Allocated Federal/Non-Federal Activity (from Schedule H4)</li> <li>(i) Federal Share</li> </ul> </li> </ul>	; ·. : :·	Calendar Year-to-Date			
	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,			
<ul><li>(ii) Non-Federal Share</li><li>(b) Other Federal Operating</li></ul>	φ.,,	· · · · · · ·			
Expenditures	, φ	, 20.00			
(add 21(a)(i), (a)(ii), and (b)) 22. Transfers to Affiliated/Other Party	$\bullet \qquad \qquad$	, 1,020.00			
Committees 23. Contributions to Federal Candidates/Committees and Other Political Committees		Ø			
24. Independent Expenditures	Contraguada a dari agriculta φ Contragua generativa da su	· · · · · · · · · · · · · · · · · · ·			
(use Schedule E) 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	$\varphi$				
26. Loan Repayments Made	, , <i>.</i> Ø	, , Ø			
<ul> <li>27. Loans Made</li> <li>28. Refunds of Contributions To: <ul> <li>(a) Individuals/Persons Other</li> <li>Than Political Committees</li> </ul> </li> </ul>	$\varphi$	, , Ø			
<ul> <li>(b) Political Party Committees</li> <li>(c) Other Political Committees</li> <li>(such as PACs)</li> </ul>	$ = \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum$	have a second			
(such as PACs) (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	$\phi$ , $\phi$ , $\phi$	, , . <b>6</b>			
29. Other Disbursements (Including Non-Federal Donations)	, ,	, , <i>b</i>			
<ul> <li>30. Federal Election Activity (52 U:S.C. § 301</li> <li>(a) Allocated Federal Election Activity (from Schedule H6)</li> </ul>					
(i) Federal Share		Ø .			
(ii) "Levin" Share	Ő.	Б			
(b) Federal Election Activity Paid					
Entirely With Federal Funds (c) Total Federal Election Activity (add	, <b>D</b>	, , <b>6</b> [			
Lines 30(a)(i), 30(a)(ii) and 30(b))	►	, , Ø			
<ol> <li>Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).</li> </ol>	., , .Ø	, (,020,00			
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)	· · · · · · · · · · · · · · · · · · ·				
from Line 31)					

## DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 5
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ul> <li>33. Total Contributions (other than loans) (from Line 11(d), page 3)</li></ul>		, Z, 5. 0. 0. 0 , 0
<ul> <li>(add Line 21(a)(i) and Line 21(b))</li></ul>	<ul> <li>1 - γ - γ - γ - γ - γ - γ</li> <li>1 - γ - γ - γ - γ - γ - γ</li> <li>1 - γ - γ - γ - γ - γ</li> <li>1 - γ - γ - γ - γ</li> <li>1 - γ - γ - γ</li> <li>1 - γ</li> <li>1</li></ul>	20.00
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S	CHEDULE A (FEC Form 3X)		[				
			Use separate schedule(s)	FOR LINE NUMBER: PAGE OF Check only one)			
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12			
			Detailed Summary Fage	13 14 15 16 17			
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.			
$\backslash$	NAME OF COMMITTEE (In Full)						
	Full Name of Individual (Last, First, Middle Ini	<u>er (or</u>	ngressional Act	tion Connittee			
Α.	Full Name of Individual (Last, First, Middle In	inial) of Full C	rganization Name	Date of Receipt			
	Mailing Address			H M / D D / Y Y Y Y			
	City	State	Zip Code				
			<u> </u>	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	IC.	n an the second of the second s	and a second and a s 			
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		,				
		·	Providence of the second				
в.	Full Name of Individual (Last, First, Middle Ini	itial) or Full C	rganization Name	Date of Receipt			
	Mailing Address			עבאבראבאראיין / <u>ארסרייט</u> / אואראאיי			
	City	State	Zip Code				
				Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		, , · .			
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General	€ - <sup>-</sup> -	avera en pre teles				
	Other (specify) ▼	1 <u>.</u>	the subserve the second second	M 41			
<u></u>	Full Name of Individual (Last, First, Middle Ini	itial) or Full O	rganization Name	Date of Receipt			
•.	Mailing Address						
	City	State	Zip Code				
			· ·	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	atta atta atta atta a				
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
	Receipt For:	Aggregate	Year-to-Date ▼	-			
	Primary General						
	Other (specify)		, , ·				
Γ							
s	UBTOTAL of Receipts This Page (optional)			> , , .			
			,				
T	OTAL This Period (last page this line number	only)	•••••••••••••••••••••••••••••••••••••••	· · · · · · · · · · · · · · · · · · ·			

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SCHEDULE B (FEC Form 3X)			FOR LINE	
ITEMIZED DISBURSEMENTS		arate schedule(s)	(check only	
	for each category of the Detailed Summary Page		21b	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and State or for commercial purposes, other than using the na			ed by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)				
Indiana Chamber Con	19× 2550	mal Act	ion Con	mittee
Full Name (Last, First, Middle Initial) A.				Date of Disbursement
Mailing Address				м Ĩм / ́о о / У ́у ў́у*́у́*,
City	State	Zip Code	1	FEC Identification Number
Purpose of Disbursement	I <u>.                                    </u>		•	C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburs	ement For: Primary	General		n ga an
State: District:	Other (spe	ecify) 🔻		Memo Item
Full Name (Last, First, Middle Initial) B.				Date of Disbursement
				M - M - / - D - D - / - Y - Y - Y
Mailing Address				territorial territoria
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburs Senate	ement For: Primary	General		
State: District:	Other (spe	ecify)		Memo Item
Full Name (Last, First, Middle Initial) C.			-	Date of Disbursement
······································				
Mailing Address				
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement	1	_,[		
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburs	ement For: Primary	General		i) 1911 - M. M. C. M. M. Martan Bartan
State: District:	Other (spe	ecify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)	=			
				ατική του
TOTAL This Period (last page this line number onl	y)		••••• •	

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# SCHEDULE C (FEC Form 3X)

OANS			for each category of the
NAME OF COMMITTEE (IN F Indiana (1)	· / •	ant-sciou	
LOAN SOURCE Full Nar			Memo Ilem Election: Primary General
LUANS       for each category of the Detailed Summary Page			Other (specify) ▼
City		State	ZIP Code
-			ನ್ನು ಕಾರ್ಯವರ್ಷದ ಸಂಗ್ರಾಮ ಸಂಗ್ರೆಯ ಸಂಗ್ರ ಸಂಗ್ರೆಯ ಸಂಗ್ರೆಯ
Date Incurr	e Wiγ i⊷ γitu Yine – ti Li E Li Eine Trans – 1 – ti	M - M / 10 - 1	рай у у у у У У У У У У У У У У У У У У У
		o Loan Source	
Mailing Address			Occupation
City	State	ZIP Code	Guaranteed
2. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Guaranteed
3. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Guaranteed
4. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Guaranteed
SUBTOTALS This Period Th	s Page (optional).		
TOTALS This Period (last pa			a staticute and an arrangement of the second secon
Carry outstanding balance of	nly to LINE 3, Sch	edule D, for th	nis line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LE		Supplementary for Information found on
Federal Election Commission, Washington, D.C. 20463		Page of Schedule C
NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·	FEC IDENTIFICATION NUMBER
Indiana Chamber Congressional	Action Committee	C 00 4 0 5 5 9 7
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR)
	ş 5	. %
Mailing Address	Date Incurred or Established	м м / , , , , , , , , , , , , , , , , ,
City State Zip Code	Date Due	− jmi.m. / jb*bjz/gviverieverieverieverieverieverieverieve
A. Has loan been restructured? No Yes	If yes, date originally incurred	
B. If line of credit, Amount of this Draw:	Outstanding	n an an an air an
C. Are other parties secondarily liable for the debt incurre No Yes (Endorsers and guarantors mu	ed? ust be reported on Schedule C.)	
<ul> <li>D. Are any of the following pledged as collateral for the liproperty, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other</li> <li>No</li> <li>Yes</li> <li>If yes, specify:</li> </ul>	deposit, chattel papers,	What is the value of this collateral?
E. Are any future contributions or future receipts of intere collateral for the loan? No Yes If yes, s		What is the estimated value?
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address:	
to any most have a contracted in the second second	City, State, Zip:	
F. If neither of the types of collateral described above wa the loan amount, state the basis upon which this loan	is pledged for this loan, or if the was made and the basis on wh	amount pledged does not equal or exceed ich it assures repayment.
G. COMMITTEE TREASURER Typed Name		DATE
Signature		N = M = Y ≥ D = D = Y ≥ Y = Y = Y = Y = Y = Y = Y = Y = Y
H. Attach a signed copy of the loan agreement.		
<ol> <li>TO BE SIGNED BY THE LENDING INSTITUTION:</li> <li>I. To the best of this institution's knowledge, the teare accurate as stated above.</li> </ol>		
<ul> <li>II. The loan was made on terms and conditions (in similar extensions of credit to other borrowers of III. This institution is aware of the requirement that complied with the requirements set forth at 11 C</li> </ul>	f comparable credit worthiness. a loan must be made on a basi	s which assures repayment, and has
AUTHORIZED REPRESENTATIVE		DATE
Typed Name Signature		

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SCHEDULE D (FEC Form 3X)		(Use	e separate	PAGE OF
DEBTS AND OBLIGATIONS		sch	nedule(s)	FOR LINE NUMBER: (check only one)
Excluding Loans		1	or each bered line)	
NAME OF COMMITTEE (In Full)	<u> </u>			
Fudiena Chamber Const	essional Action Commi	rree		
A. Full Name (Last, First, Middle Initial) of De	btor or Creditor.		Nature of D	ebt (Purpose):
ļ				
Mailing Address				
City State	Zip Code			
City State				
Outstanding Balance Beginning This Period				
รี รับการที่ 1: เขาไดกระทำให้เราสล้างๆ แล้วๆ อยู่ได้ไหม สำหาย สามารถไม่เราครั้น				
Amount Incurred This Period	Payment This Period	ar er gede er by		ng Balance at Close of This Period
f. Seven Barrilland Barri Barricha an Pierret (* 2011) - Mariela agus	a a na sanaha na pranana katala na sana na sana katala na sana katala katala katala katala katala katala katala k	and and a	t The chies where	ง 1. 1. เมษายายายายายายายายายายายายายายายายายายาย
B. Full Name (Last, First, Middle Initial) of Deb	tor or Creditor		Nature of De	ebt (Purpose):
Mailing Address		{		
City	7:0 Codo			
City State	Zip Code	Ì		
Outstanding Balance Beginning This Period		·····		·
a 1 1 1 Antomic Construction of Construction and				
Amount Incurred This Period	Payment This Period			g Balance at Close of This Period
الم محمل المحمود الله المحمد المحمد المحمدات والمحمول المحمول المحمد المحمد المحمد المحمد المحمد الم المحمد المحمد	n generen er sollen er er er en en gelt in solletter gebourgeste Arten en op 1	anteren en G	y haren ezetetetetetetetetetetetetetetetetetete	and a state and a state of the
ใบสารให้การที่การพี่ไม่การที่มาต่างไว้ เล่าที่มามาการกำรับสารที่ได้ เล่ากับ 	the standard the state of the s	nest a st	len vertener dan.	กะมีวิทยุกที่ คนเจริมาหน้าที่ระหมู่ใดหระเจ้าหระที่ไปการจำหระที่ไ
C. Full Name (Last, First, Middle Initial) of Del	otor or Creditor		Nature of De	ebt (Purpose):
Mailing Address	· · · · · · · · · · · · · · · · · · ·			
City	State Zip Code	{		
·				
Outstanding Balance Beginning This Period				
the second s				
Amount Incurred This Period	Payment This Period		Outstandin	g Balance at Close of This Period
n 19 19 19 - Marcia Marcia (Marcia) (Marcia) (Marcia) (Marcia) (Marcia)	han an air ann an	1. A. A.	,	เสีย แล้ง เป็นหลังโบระมีสองที่มาเรื่องเหลือง
				en in de la constant de la constant Indexes de la constant
1) SUBTOTALS This Period This Page (optional)		►		
	- <u>-</u>		รัฐ เวลาเหตุ (กระสุราช การสารกระสารกระสุขาย	ที่สามารถสมับสมมัญชาติสมาร์สามาร์สามาร์สามาร์สามาร์สามารถสมมัก พระสุขณามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสาม สามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสาม
2) TOTALS This Period (last page this line numb	er only)	<b>&gt;</b>	รู้ พ.ศ. พ.ศ. พ.ศ. 466 มีหมายหน้า พ.ศ. 466	สมีวิทษเรียงหม่อตามมีวิทษส์กระหว่างกระไป สปฏาควรุษทรายสูงสมธุรสมบุรียะ ก่างหมากกระหว่าง
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# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

ITEMIZED INDEPENDENT EXPENDITURES	PAGE OF FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER V
Indiana Champer Congressional Action Committee	C 0 0 4 0 5 5 9 7
Check if 24-hour report 48-hour report New report Amends report fil	ed on a state of the state of t
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure Category/	HERE HANNEL & BORDER & BORDER & CONSULATE AND A
Name of Federal Candidate     Support     Off       Oppose     []	fice Sought: House District: President Senate State:
Calendar Year-To-Date Dis Per Election for Office Sought	sbursement For: Primary General General Other (specify) ►
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount ราง และการการสาราย เกมร์การการสารายสารายสารายสาราย เกมร์การการการการสารายสารายสารายสารายสารายสาร
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Purpose of Expenditure Category/	Date of Disbursement or Obligation
Name of Federal Candidate Support Of Oppose	flice Sought: House District:
Calendar Year-To-Date Di Per Election for Office Sought	sbursement For: Primary General General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	าราง สิงคมกับการรู้ (การกระบบสมุของได้เอย สิงคมกับสมบริษัท การกระบ การกระบบสายครั้งการกระบบสมุของสิงคมสร้างการสิงคมกับสายครั้งการกระบบ การกระบบสายครั้งการกระบบสมุของสิงคมสร้างการสิงคมกับสายครั้งการกระบบ การกระบบสายครั้งการกระบบสายครั้งการสิงคมสร้างการสิงคมกับสายครั้งการกระบบสายครั้งการกระบบสายครั้งการกระบบสายครั้งกา
(b) SUBTOTAL of Uniternized Independent Expenditures	ราย และสุขานสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการ ชื่อ เหมาะการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไรการสาวไร
(c) TOTAL Independent Expenditures	รายเหตุการรับเหตุรูลแห่งระดาชสมเสราสาวาร์ตามสาวาร์ (ค.ศ. 2017) 1. กระสาวาร์การสังการรับการสำนานสาวาร์ตามสาวาร์ตามสาวาร์ (ค.ศ. 2017) 1. กระสาวาร์การสังการสาวาร์ตามสาวาร์ตามสาวาร์ตามสาวาร์ตามสาวาร์ตามสาวาร์ตามสาวาร์ตามสาวาร์ตามสาวาร์ตามสาวาร์ตาม
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eigenty committee) any political party committee or its agent.	
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	FEC Schedule E (Form 3X) Rev. 09/2013

CHEDULE F (FEC Form 3	X)					
EMIZED COORDINATED PAR DLITICAL PARTY COMMITTE						` 
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U.S.C. §441a(d)) (To	be used only by	/ Political Com	nittees in the (	General Election)	FOR LINE	25 OF FORM 3
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s your committee been designated to ma	تبريها فسيرجب المرجب	JII Name of Sub	ordinate Commi	ttee		
ordinated expenditures by a political party						
YES, name the designating committee:	M	ailing Address				
	Ci	ty		Sta	ite Z	P Code
Full Name (Last, First, Middle Initial) of	Each Payee	<u></u>	·· <u>-</u>	Purpose of Exp	enditure	รี มีสา.ษร์การเจรไดยก
						Category
Mailing Address				Date		Туре
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Name of Federal Candidate Supported	Office Sought:	House	State:	Amount	inin sister da data data data data data data data	
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City	State	Zip Code		M <sup>27</sup> M / t	· · · ·	y y Y
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FEC Schedule F (Form 3X) Rev. 02/2009

### SCHEDULE H1 (FEC Form 3X)

#### METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

Indiana Chamber Congressional Action Committee
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees
Flat Minimum Federal Percentage
Flat Minimum Federal Percentage
Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check
Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check or If the committee is spending more than 50% federal funds, indicate ratio below
Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check

SCHEDULE H2 (FEC Form 3X)		<b></b>
ALLOCATION RATIOS		PAGE OF
NAME OF COMMITTEE (In Full) <u>Ludiana</u> RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA ACTIVITIES APPEARING ON THIS REPORT. Methods of allocation:	Committee ATE SUPPORT	
<ul> <li>I. FUNDRAISING activities are allocated using the "funds received met expenses must equal the federal proportion of monies raised.</li> <li>II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according where the federal proportion of disbursements is based on the benefitivity. For PACs Only: Direct candidate support includes public commister and nonfederal candidates, regardless of whether there is a mare allocated using a time/space method.</li> </ul>	ording to benefit expected fit derived by federal cand nunications or voter drives	to be derived, lidates from the ac- s that refer to both
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fundraising Direct Candidate Support CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
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ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fundraising Direct Candidate Support CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fundraising Direct Candidate Support CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %

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

PAGE OF

FOR LINE 18a OF FORM 3X

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ii)	Generic Voter Drive		
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iii)	Exempt Activities		la a constante de la constitución d
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S	CHEDULE H4 (FEC Form 3X)		
	SBURSEMENTS FOR ALLOCATED		FOR LINE 21a OF FORM 3
N	AME OF COMMITTEE (In Full)	<u> </u>	
	Indiana Chamber Congressional Action	Commit	tee
Α.	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
			Administrative Fundraising Exempt
	Mailing Address		Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:	· · · · · ·	Allocated Activity or Event Year-To-Date
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	Activity or Event Identifier:	Category/ Type	
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 В.	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
D.			Administrative Fundraising Exempt
	Mailing Address		Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party only) by PAC
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C.	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
			Administrative Fundraising Exempt
	Mailing Address		Voter Drive Direct Candidate Support
	City State Zip Code	· · · · · · · · · · · · · · · · · · ·	Public Comm (ref to party only) by PAC
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### SCHEDULE H5 (FEC Form 3X)

## TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

be used b	by State, District and Loc	al Party Committees Only)	FOR LINE 186 OF FOR
IE OF CON	MITTEE (In Full)		
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ii)	Voter ID	· ·	······································
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iii)	GOTV		GOTV
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iv)	Generic Campaign Activity	:	GENERIC CAMPAIGN ACTIVITY
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iv)	Generic Campaign Activity		
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TOTA	This Period (Generic Campaign	Activity)	an a
	-	ransfers Received)	

FEC Schedule H5 (Form 3X) Rev. 02/2003

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SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUN	וחכ		·····
FOR ALLOCATED FEDERAL ELECTION ACTIVITY			PAGE ( OF
(To be used by State, District and Local Party Committees			FOR LINE 30a OF FORM 3X
NAME OF COMMITTEE (In Full)	······		<u></u>
Indiana Chamber Congressional Action	Committe		
A. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated	
		Voter ID	Generic Campaign
Mailing Address			vity or Event Year-To-Date
City State Zip Code			n
Purpose of Disbursement	Category/ Type	Date	
FEDERAL SHARE + LEVIN SH	n a georaíoch agus gair		TOTAL AMOUNT
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C. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated A Voter Registra Voter ID	·
Mailing Address			vity or Event Year-To-Date
City State Zip Code	Hand Barran Hansard	······	
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FEC Schedule H6 (Form 3X) Rev. 02/2003

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## SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

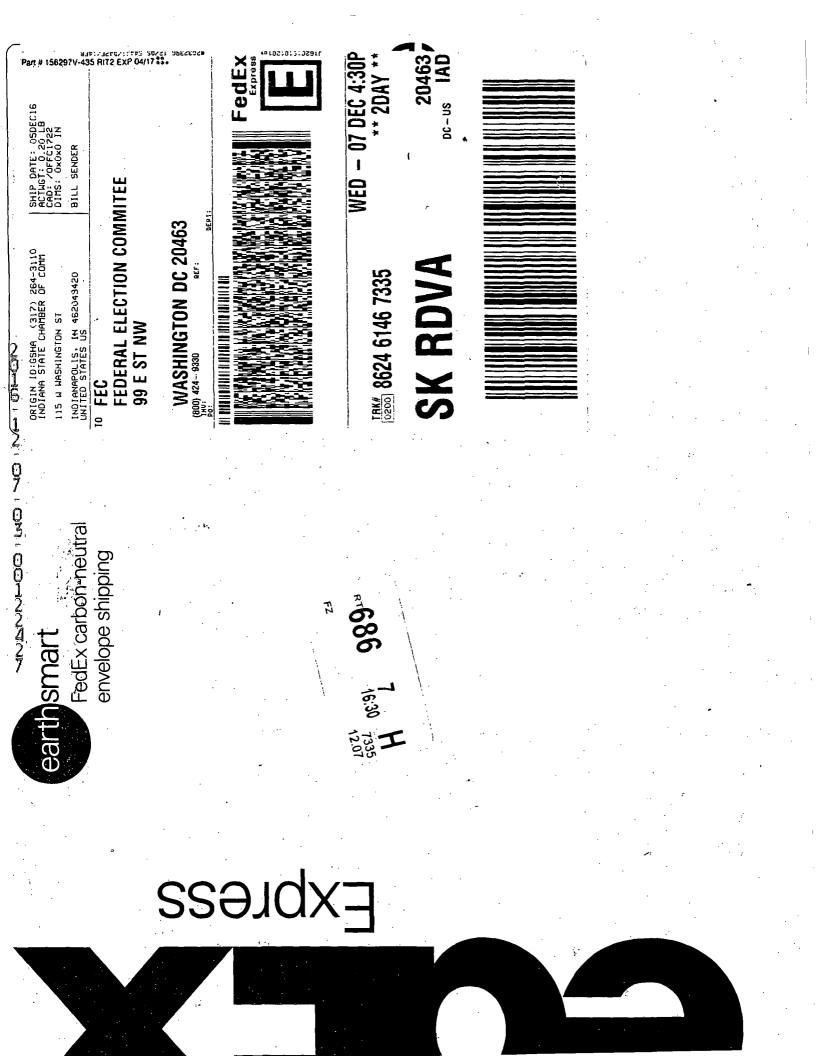
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SCHEDULE L-A (FEC Form 3X)		PAGE OF
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