PAGE 1 / 11

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An Au	thorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
INVACARE CORPORA	ATION POLITICAL A	ACTION COMMITTEE	E AKA INVA PAC
ADDRESS (number and street)	ONE INVACARE WAY		
▼ Check if different			
than previously reported. (ACC)	ELYRIA		OH 44035 - -
2. FEC IDENTIFICATION NU	JMBER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00249896		S THIS NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	o 20 (M2) May 20	(Non-Election Year Only)
(a) Quarterly Reports:	An	r 20 (M4) Jul 20 (l	Year Only)
April 15 Quarterly Report (Q		301 20 (I	
July 15 Quarterly Report (Q	PRE-Election	Primary (12P)	x General (12G) Runoff (12R)
October 15 Quarterly Report (C	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Y	Election	on on 11 08	in the State of OH
July 31 Mid-Year Report (Non-election Year Only) (MY)	n (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		on on	in the State of
5. Covering Period 10	01 / 2016		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined th		f my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	Fox, Jerome, E, , Jr.		
Signature of Treasurer	Jerome, E, , Jr.	[Electronically Filed]	Date 10 / 21 / 2016
NOTE: Submission of false, errone	eous, or incomplete information	on may subject the person sign	ning this Report to the penalties of 52 U.S.C. § 3010
Office			FEC FORM 3X
Use Only			Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA RAC

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
-	(a) Cash on Hand January 1, 2016		5914.99
	(b) Cash on Hand at Beginning of Reporting Period	1948.96	
	(c) Total Receipts (from Line 19)	666.83	16523.77
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2615.79	22438.76
	Total Disbursements (from Line 31)	375.00	20197.97
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2240.79	2240.79
	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	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 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:	Iotai IIIIS Fellou	Calcilual Teal-10-Date
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	500.83	9779.77
(ii) Unitemized	166.00	6744.00
(iii) TOTAL (add	45 45	4 4
Lines 11(a)(i) and (ii)▶	666.83	16523.77
	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines	4 4	4 4
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	666.83	16523.77
12. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
	7 7 2	
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures	7-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1-	7 7 7 7
(Refunds, Rebates, etc.)	0.00	
(Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		4 4
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(a) Total Transfers (add 19(a) and 19(b))	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d),	666.00	16522 77
12, 13, 14, 15, 16, 17, and 18(c))▶	666.83	16523.77
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	666.83	16523.77

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Operating Expenditures: – (a) Allocated Federal/Non-Federal Activity (from Schedule H4) 	3 1 2012 2	
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	375.00	18625.00
Independent Expenditures (use Schedule E)	0.00	0.00
5. Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	45 1 45 1 45
(use Schedule F)		0.00
. Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
. Other Disbursements (Including		
Non-Federal Donations)	0.00	1572.97
 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
. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	375.00	20197.97
. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	375.00	20197.97

34. Total Contribution Refunds

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) III. Net Contributions/

Operating Expenditures

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 33. Total Contributions (other than loans) 666.83 16523.77 (from Line 11(d), page 3) 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 16523.77 666.83 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 0.00 0.00 (add Line 21(a)(i) and Line 21(b))▶ 0.00 0.00 (from Line 15, page 3)..... 0.00 0.00 (subtract Line 37 from Line 36)

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

	F	OR	LINE	NU	MBER	:	PAGE	6	OF	11	
(check only one)											
		X	11a		11c	12	2				
	13 14					15	16	6	17		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bachenheimer, Cara, , , Date of Receipt Mailing Address 9323 Old Mansion Road 15 2016 City Zip Code State Transaction ID: SA11AI.9448 VA Alexandria 22309 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sr. VP Government Relations Invacare Corporation Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 2041.64 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Carter, Christopher, , , Date of Receipt Mailing Address 2650 Dade Avenue 10 15 2016 Apt 1517 City State Zip Code Transaction ID: SA11AI.9452 FL Orlando 32804 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Invacare Corporation Payroll deduction Director of Operations - Sanford Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 245.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Childers, Dean, , , Date of Receipt Mailing Address 3012 Whispering Shores

10 15 2016 City State Zip Code Transaction ID: SA11AI.9453 OH Vermilion 44089 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction **Invacare Corporation** Sr VP & GM - North America Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 190.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

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			13		14		15		16	6		17

Anv information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

City Oxford State Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FEC ID number of contributing federal political committee. Name of Employer (for Individual) Territory Business Manager Receipt For: Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fox, Jerome E., , , Jr. Mailing Address 26114 Cobblestone Trail City State Zip Code OH 44028 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Aggregate Year-to-Date ▼ Cocupation (for Individual) Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cocupation (for Individual) Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cuber (specify) ▼ Cuber (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Por: Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cuber (specify) ▼ Date of Receipt Por: Aggregate Year-to-Date ▼ Date of Receipt Por: Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cuber (Specify) ▼ Date of Receipt Por: Amount of Each Parameters of Parameters of Receipt Port Parameters	s from such committee.
City Oxford Mil A8371 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Other (specify) ▼ A29.13 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Other (specify) ▼ A29.13 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Other (specify) ▼ A245,00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Culty Coleveland Other (specify) ▼ A245,00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Culty Coleveland Other (specify) ▼ A245,00 Full Name of Employer (for Individual) Invacare Corporation FEC ID number of contributing federal political committee. Name of Employer (for Individual) Occupation (fo	
Oxford MI 48371 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FOX, Jerome E., , , Jr. Mailing Address 26114 Cobblestone Trail City Columbia Station FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation FUIl Name of Individual (Last, First, Middle Initial) or Full Organization Name City City City Columbia Station FUIl Name of Individual (Last, First, Middle Initial) or Full Organization Name City Cit	5 2016
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Payroll deduction Payroll deduction Payroll deduction Date of Receipt Transaction ID Amount of Each Aggregate Year-to-Date ▼ Date of Receipt Transaction ID Amount of Each Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Clity Cleveland FEC ID number of contributing federal political committee. City Cleveland FEC ID number of contributing federal political committee. City Cleveland FEC ID number of contributing federal political committee. City Cleveland FEC ID number of contributing federal political committee. City Cleveland FEC ID number of contributing federal political committee. City Cleveland FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Date of Receipt Transaction ID Amount of Each Memo Item Payroll deduction Amount of Each Amount	: SA11AI.9454
Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Of Employer (for Individual) City Columbia Station Receipt For: Primary General Other (specify) ▼ State Zip Code OH 44028 Columbia Station Columbia Station Columbia Station Receipt For: Primary General Other (specify) ▼ Primary General Other (specify) ▼ State Zip Code OH 44028 Cocupation (for Individual) Invacare Corporation Receipt For: Primary General Other (specify) ▼ State Zip Code OH 44106 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cocupation (for Individual) Invacare Corporation Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cocupation (for Individual) Cocupation Name Cocupation (for Individual) Cocupation (for Individual) Cocupation (for Individual) Cocupation (for Individual) Cocupation Name Cocupation (for Individual) Cocupation Name Cocupa	Receipt this Period
Invacare Corporation Receipt For: Primary	20.83
Receipt For:	
Primary	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name i. Fox, Jerome E., , , Jr. Mailing Address 26114 Cobblestone Trail City Columbia Station FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each City City City City Cleveland FEC ID number of contributing federal political committee. Name of Employer (for Individual) City Cleveland City Coupation (for Individual) Coccupation (for Individual) Coccupation (for Individual) City Cleveland City Coupation (for Individual) Chief Financial Officer Payroll deduction Payroll deduction	
Date of Receipt Mailing Address 26114 Cobblestone Trail City Columbia Station FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Primary General Other (specify) ▼ City City Cleveland FEU ID Number of contributing federal political committee. State Zip Code OH A4028 Aggregate Year-to-Date ▼ Transaction ID Amount of Each Payroll deduction Date of Receipt Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Transaction ID Amount of Each Payroll deduction Date of Receipt Date of Receipt Aggregate Year-to-Date ▼ Transaction ID Amount of Each Date of Receipt Date of Receipt Amount of Each City Cleveland FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Occupation (for Individual) Chief Financial Officer Payroll deduction	
Mailing Address 26114 Cobblestone Trail City Columbia Station FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gudbranson, Robert, , Mailing Address 2521 Fairmount City Cleveland FEC ID number of contributing federal political committee. Name of Employer (for Individual) Cleveland Cleveland Cleveland Cleveland Coccupation (for Individual) Amount of Each Transaction ID Amount of Each Date of Receipt Transaction ID Amount of Each C Transaction ID Amount of Each C Amount of Each Transaction ID Amount of Each Amount of Each C Amount of Each Amount of Each FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	
City Columbia Station FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Payroll deduction Aggregate Year-to-Date ▼ Date of Receipt Transaction ID Amount of Each Amount of Each Payroll deduction Aggregate Year-to-Date ▼ Date of Receipt Transaction ID Amount of Each Payroll deduction Aggregate Year-to-Date ▼ Date of Receipt Transaction ID Amount of Each Payroll deduction City Cleveland FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	
City Columbia Station FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Payroll deduction Path Mailing Address 2521 Fairmount City Cleveland FEC ID number of contributing federal political committee. Name of Employer (for Individual) City State Zip Code OH 44106 Cleveland Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	5 2016
Columbia Station Columbia St	
FEC ID number of contributing federal political committee. Name of Employer (for Individual) VP - Corporate Tax Receipt For:	
Invacare Corporation Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gudbranson, Robert, , , Mailing Address 2521 Fairmount City Cleveland FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Occupation (for Individual) Chief Financial Officer Aggregate Year-to-Date ▼ Payroll deduction Payroll deduction Payroll deduction Payroll deduction	15.00
Primary	
Aggregate Year-to-Date Date of Receipt Transaction ID Amount of Each C Memo Item Payroll deduction	
Mailing Address 2521 Fairmount City Cleveland State OH 44106 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Garage State Zip Code 44106 Amount of Each C Memo Item Payroll deduction	
Cleveland OH 44106 Amount of Each FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General OH 44106 Amount of Each C Memo Item Payroll deduction	5 2016
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Allount of Each Occupation (for Individual) Chief Financial Officer Aggregate Year-to-Date ▼	: SA11AI.9459
Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Occupation (for Individual) Chief Financial Officer Aggregate Year-to-Date ▼	Receipt this Period
Invacare Corporation Receipt For: Primary General Cccupation (to individual) Chief Financial Officer Aggregate Year-to-Date ▼	42.00
Receipt For: Primary General Aggregate Year-to-Date ▼	
Primary General Aggregate Teal-to-Date V	
100.00	
SUBTOTAL of Receipts This Page (optional)	77.83

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

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or for commercial purposes, other than using	the name and address of any political committee						
NAME OF COMMITTEE (In Full) INVACARE CORPORATION	I POLITICAL ACTION COMMITTE	E AKA INVA PAC					
Full Name of Individual (Last, First, Middle Kovacs, Judith, , ,	e Initial) or Full Organization Name	Date of Receipt					
Mailing Address 5341 Sturbridge Court		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code	Transaction ID : SA11AI.9465					
Sheffield Village	OH 44054	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	15.00					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item					
Invacare Corporation	VP Customer Service	Payroll deduction					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	285.00						
Full Name of Individual (Last, First, Middle Nordquist, Michael, , ,	e Initial) or Full Organization Name	Date of Receipt					
Mailing Address 803 Allen Drive		10 15 2016					
City	State Zip Code						
Longmont	CO 80503	Transaction ID : SA11AI.9471 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	25.00					
Name of Employer (for Individual) Invacare Corporation	Occupation (for Individual) Director Prod Mgmt, Custom Manual	Memo Item Payroll deduction					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00						
Full Name of Individual (Last, First, Middle Peterson, Bradford, , ,	e Initial) or Full Organization Name	Date of Receipt					
Mailing Address 29 Belle Avenue		10 15 2016					
City	State Zip Code	Transaction ID : SA11AI.9472					
Warwick	RI 02889	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	21.00					
Name of Employer (for Individual)	Occupation (for Individual) VP Prof Affairs & Clinical Education	Memo Item Payroll deduction					
Invacare Corporation Receipt For:		- ayıon acaacıon					
Primary General Other (specify)	Aggregate Year-to-Date ▼ 231.00]					
SUBTOTAL of Receipts This Page (optional	l)	61.00					
TOTAL This Period (last page this line num	<u> </u>						

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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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) INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pickett, William, , , Date of Receipt Mailing Address 578 Ashley Way 10 15 2016 City State Zip Code Transaction ID: SA11AI.9473 KY Lexington 40503 Amount of Each Receipt this Period FEC ID number of contributing C 45.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Rehab Sales Specialist **Invacare Corporation** Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 495.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Schuler, Gretchen, , , Date of Receipt Mailing Address 28710 Berkshire Drive 10 15 2016 City State Zip Code Transaction ID: SA11AI.9477 North Olmsted OH 44070 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Invacare Corporation Payroll deduction **Director of Litigation Management** Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) V	4	790.00	
Full Name of Individual (Last, First, Middle In Stumpp, Patricia, , , Mailing Address 1009 Jonathan Street	iitial) or Full Org	anization Name	Date of Receipt
City Amherst	State OH	Zip Code 44001	10 15 2016 Transaction ID : SA11AI.9481 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer (for Individual) Invacare Corporation Receipt For: Primary General Other (specify)	Directo	ation (for Individual) or Human Resources ear-to-Date ▼ 300.00	Memo Item Payroll deduction
			107.00

SUBTOTAL of Receipts This Page (optional).....

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

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

Use separate schedule(s) for each category of the

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		13		14		15	16		17

Detailed Summary Page 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) INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Watkins, John, , , Date of Receipt Mailing Address 4961 Hiddenview Court 15 2016 City Zip Code State Transaction ID: SA11AI.9482 OH North Ridgeville 44039 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Sr VP Quality and Regulatory Affairs **Invacare Corporation** Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Wilhelm, Kimberly, , , Date of Receipt Mailing Address 2010 Gulf Road 10 15 2016 City State Zip Code Transaction ID: SA11AI.9483 OH Elyria 44035 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Invacare Corporation Payroll deduction Sales & Service Manager - TAG Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 380.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Zumsteg, Jacqueline, , , Date of Receipt Mailing Address 812 Barbara Ann Lane 10 15 2016 City Zip Code State Transaction ID: SA11AI.9485 MO Baldwin 63021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction **Invacare Corporation** Manager - Contract Interiors & Design Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the		FOR LINE	FOR LINE NUMBER: PAGE 11 OF 11		
ITEMIZED DISBURSEMENTS			(check only one)			
		Summary Page	21b 28a	22 x 23 28c	26 27 29 30b	
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or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)					_	
$\left ight>$ INVACARE CORPORATION POLI	TICAL A	CTION CO	MMITTEE	AKA INVA PA	С	
Full Name (Last, First, Middle Initial)						
A. TIBERI FOR CONGRESS				Date of Disbursement		
Mailing Address 2931 E DUBLIN GRANVILLE ROAD				10 05		
SUITE 190	ı					
City S COLUMBUS	State OH	Zip Code 43231		FEC Identification	Number	
Purpose of Disbursement		10201		C C00347492		
Fundraising event of 10/09/16 011				Transaction ID : SB23.9487		
Candidate Name Category/ TIBERI, PATRICK J., , ,				Amount of Each I	Disbursement this Period	
Type Office Sought: Main Disbursement For: 2016				375.00		
Senate Primary General				Memo Item		
President State: OH District: 12	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
B.				Date of Disbursement		
All the sea Andreas				M M / D D / Y Y Y Y		
Mailing Address						
City State Zip Code				FEC Identification	Number	
Purpose of Disbursement				C		
				O		
Candidate Name Category/				Amount of Each Disbursement this Period		
Office Sought: House Disbursement For:						
	Primary General			4	7 7	
	Other (specify)			Memo Item		
State: District: Full Name (Last, First, Middle Initial)						
C.				Date of Disburser	ment	
				M M / D D / Y Y Y Y		
Mailing Address						
City	State	Zip Code		FEC Identification	Number	
Purpose of Disbursement						
Candidate Name Category/				Amount of Each Disbursement this Period		
Office Sought: House Disbursen	nent For		Туре			
					7 7	
	Other (specify) ▼			Memo Item		
State: District:						
SUBTOTAL of Disbursements This Page (optional)					375.00	
				7	075.00	
TOTAL This Period (last page this line number only)			·····•		375.00	