

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Bucshon for Congress

ADDRESS (number and street)

PO Box 250

Check if different
than previously
reported. (ACC)

Newburgh

IN

47629

2. FEC IDENTIFICATION NUMBER ▼

C

C00468256

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

IN

08

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)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

17

Y Y Y Y

2014

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2014

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 Mr. John L. Wright

Signature of Treasurer

Mr. John L. Wright

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

15

Y Y Y Y

2014

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

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 65

Write or Type Committee Name

Bucshon for Congress

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 7 | | 2 | 0 | 1 | 4 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 1 | 4 |

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 124190.00 | 872891.33 |
| (b) Total Contribution Refunds (from Line 20(d)) | 3000.00 | 5250.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 121190.00 | 867641.33 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 45210.89 | 326996.92 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 1080.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 45210.89 | 325916.92 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 484552.77 | |
| 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 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Bucshon for Congress

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 7 | | 2 | 0 | 1 | 4 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 1 | 4 |

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

62600.00

455598.62

(ii) Unitemized.....

1340.00

31077.00

(iii) TOTAL of contributions from individuals ▶

63940.00

486675.62

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

60250.00

386215.71

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

124190.00

872891.33

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

5832.42

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

1080.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

124190.00

879803.75

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 65

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 45210.89 | 326996.92 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 1750.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 3000.00 | 3500.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 3000.00 | 5250.00 |
| 21. OTHER DISBURSEMENTS | 57000.00 | 79500.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 105210.89 | 411746.92 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 465573.66 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 124190.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 589763.66 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 105210.89 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 484552.77 |

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

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

FOR LINE NUMBER:

PAGE 5 OF 65

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Mr. Richard Barnhart

Mailing Address 4400 Stringtown Road

City

Evansville

State

IN

Zip Code

47711

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2014 |

Transaction ID : SA11Al.16441

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Dr. John A. Bizal

Mailing Address 1500 Spring Creek Drive

City

Evansville

State

IN

Zip Code

47710-5419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tri State Ear Nose Throat Surg

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 05 | | 2014 |

Transaction ID : SA11Al.16411

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Dr. Wayland G. Blikken

Mailing Address 1717 W. Summit Drive

City

Evansville

State

IN

Zip Code

47712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anesthesiology Group Assoc.

Occupation

Anesthesiologist

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 05 | | 2014 |

Transaction ID : SA11Al.16405

Amount of Each Receipt this Period

1000.00

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

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

1500.00

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

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

FOR LINE NUMBER:

PAGE 6 OF 65

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Mrs. Karen Cinelli

Mailing Address 5405 Winthrop Court

City

Evansville

State

IN

Zip Code

47715

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

3600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 20 | | 2014 |

Transaction ID : SA11AI.16338

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Dr. MaryAnn Dunfee

Mailing Address 285 Cedar Lane

City

Spencer

State

IN

Zip Code

47460

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

450.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 23 | | 2014 |

Transaction ID : SA11AI.16546

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Dr. MaryAnn Dunfee

Mailing Address 285 Cedar Lane

City

Spencer

State

IN

Zip Code

47460

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 27 | | 2014 |

Transaction ID : SA11AI.16560

Amount of Each Receipt this Period

50.00

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

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

2750.00

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

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

FOR LINE NUMBER:

PAGE 7 OF 65

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Mr. Derek Dunigan

Mailing Address 3110 Orchard Road

City

Evansville

State

IN

Zip Code

47720

FEC ID number of contributing federal political committee.

C

Name of Employer
Holiday Health Care

Occupation

Nursing Home Owner

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 17 | | 2014 |

Transaction ID : SA11Al.16491

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Mrs. Gail Dunn

Mailing Address 10445 Old Plantation Dr

City

Evansville

State

IN

Zip Code

47725

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2014 |

Transaction ID : SA11Al.16445

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Mr. John M. Dunn

Mailing Address 10445 Old Plantation Dr

City

Evansville

State

IN

Zip Code

47725

FEC ID number of contributing federal political committee.

C

Name of Employer
Dunn Hospitality Group

Occupation

Owner

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11Al.16384

Amount of Each Receipt this Period

2600.00

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

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

6600.00

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

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

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Mr. G. Richard Eykamp

Mailing Address PO Box 4915

City

Evansville

State

IN

Zip Code

47724

FEC ID number of contributing federal political committee.

C

Name of Employer

Mid States Rubber Co.

Occupation

Engineer

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16385

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mrs. Mary Ellen Farabaugh

Mailing Address 850 S. Meadow Road

City

Evansville

State

IN

Zip Code

47714

FEC ID number of contributing federal political committee.

C

Name of Employer

D Patrick Inc.

Occupation

Owner

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 17 | | 2014 |

Transaction ID : SA11AI.16487

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Fred M. Fehsenfeld Sr.

Mailing Address 149 Willowgate Lane

City

Indianapolis

State

IN

Zip Code

46260

FEC ID number of contributing federal political committee.

C

Name of Employer

Asphalt Materials, Inc.

Occupation

CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16388

Amount of Each Receipt this Period

2600.00

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

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

4100.00

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

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

FOR LINE NUMBER:

PAGE 9 OF 65

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Mr. Steven A. Fisher

Mailing Address 1656-D Beekman Place NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Build Indiana Council

Occupation

Washington Representative

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 02 | | 2014 |

Transaction ID : SA11Al.16302

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mr. Charles Fooks

Mailing Address 4780 Lincoln Pointe

City

Newburgh

State

IN

Zip Code

47629

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Construction

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 30 | | 2014 |

Transaction ID : SA11Al.16569

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Mr. Bruno Garzolini Jr.

Mailing Address 736 Richland Drive

City

Terre Haute

State

IN

Zip Code

47802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Garzo Tire, Inc.

Occupation

Owner

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 26 | | 2014 |

Transaction ID : SA11Al.16555

Amount of Each Receipt this Period

500.00

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

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

1050.00

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

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

FOR LINE NUMBER:

PAGE 10 OF 65

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Mr. Frederick Geissinger

Mailing Address 8712 Whetstone Road

City

Evansville

State

IN

Zip Code

47725

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2014 |

Transaction ID : SA11Al.16452

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

B. Mrs. Michele Geissinger

Mailing Address 8712 Whetstone Road

City

Evansville

State

IN

Zip Code

47725

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2014 |

Transaction ID : SA11Al.16451

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Mr. Daniel F. Grimm Jr.

Mailing Address 14241 Petersburg Road

City

Evansville

State

IN

Zip Code

47725-8362

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Mutual

Occupation

Financial Advisor

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2014 |

Transaction ID : SA11Al.16438

Amount of Each Receipt this Period

500.00

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

5700.00

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

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

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

FOR LINE NUMBER:

PAGE 11 OF 65

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Dr. Christopher T. Haughn

Mailing Address 7877 Scottsdale Drive

City

Newburgh

State

IN

Zip Code

47630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Evansville Surgical Associates

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 30 | | 2014 |

Transaction ID : SA11AI.16571

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mr. Daniel S. Hermann

Mailing Address 6912 Newburgh Road

City

Evansville

State

IN

Zip Code

47715

FEC ID number of contributing
federal political committee.

C

Name of Employer

AmeriQual Group LLC

Occupation

Executive

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16371

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mrs. Kim S. Hermann

Mailing Address 6912 Newburgh Road

City

Evansville

State

IN

Zip Code

47715

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

3600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16370

Amount of Each Receipt this Period

2600.00

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

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

5450.00

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

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

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Mr. D. Keith Jewell

Mailing Address 8027 Wyngate Circle

City

Newburgh

State

IN

Zip Code

47630

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Mary's Health

Occupation

President

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 05 | | 2014 |

Transaction ID : SA11AI.16399

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mrs. Denise A. Johnson

Mailing Address 6655 River Ridge Drive

City

Newburgh

State

IN

Zip Code

47630

FEC ID number of contributing
federal political committee.

C

Name of Employer

City of Evansville

Occupation

Director of Parks & Rec

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2014 |

Transaction ID : SA11AI.16446

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mr. Kyle G. Johnson

Mailing Address 7517 E 450 N

City

Franciso

State

IN

Zip Code

47649-9278

FEC ID number of contributing
federal political committee.

C

Name of Employer

Onsite OHS

Occupation

CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 05 | | 2014 |

Transaction ID : SA11AI.16414

Amount of Each Receipt this Period

1000.00

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

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

2000.00

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

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

FOR LINE NUMBER:

PAGE 13 OF 65

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Dr. Peter Juran

Mailing Address 522 Reserve Blvd.

Apt. E

City

Evansville

State

IN

Zip Code

47715

FEC ID number of contributing
federal political committee.

C

Name of Employer
Deaconess HospitalOccupation
Physician

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

351.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 30 | | 2014 |

Transaction ID : SA11AI.16570

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Mr. Robert M. Kent

Mailing Address 8012 Wyngate Circle

City

Newburgh

State

IN

Zip Code

47630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kenny Kent MotorsOccupation
Auto Dealer

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16390

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mrs. Cynthia R. Koch

Mailing Address 4120 Mulberry Place

City

Evansville

State

IN

Zip Code

47714-0668

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Homemaker

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16376

Amount of Each Receipt this Period

2600.00

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

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

2900.00

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

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

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Ms. Patricia Koch

Mailing Address PO Box 36

City

Santa Claus

State

IN

Zip Code

47579

FEC ID number of contributing
federal political committee.

C

Name of Employer

Koch Development Corporation

Occupation

Director

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 05 | | 2014 |

Transaction ID : SA11Al.16410

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Dr. Deepa Kumbar

Mailing Address 4644 Estate Drive

City

Newburgh

State

IN

Zip Code

47630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Valley Heart Care

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 17 | | 2014 |

Transaction ID : SA11Al.16486

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mrs. Peggy Schuck Lewis

Mailing Address 54 Oak Meadow Road
PO Box 4643

City

Evansville

State

IN

Zip Code

47724

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lewis Bakeries

Occupation

Executive

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2014 |

Transaction ID : SA11Al.16447

Amount of Each Receipt this Period

500.00

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

3350.00

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

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

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

FOR LINE NUMBER:

PAGE 15 OF 65

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Mr. David Matthews

Mailing Address 420 Main Street

Suite 1300

City

Evansville

State

IN

Zip Code

47708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Appraiser

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 30 | | 2014 |

Transaction ID : SA11AI.16568

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mrs. Sue McCool

Mailing Address PO Box 133

City

Chandler

State

IN

Zip Code

47610

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 20 | | 2014 |

Transaction ID : SA11AI.16330

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Mr. Robert H. Menke Jr.

Mailing Address PO Box 100

City

Huntingburg

State

IN

Zip Code

47542

FEC ID number of contributing
federal political committee.

C

Name of Employer

OFS Brands

Occupation

President

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 20 | | 2014 |

Transaction ID : SA11AI.16332

Amount of Each Receipt this Period

250.00

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

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

2950.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 65

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial)
Mr. James H. Muehlbauer

Mailing Address 2300 E. Gum Street

City State Zip Code
Evansville IN 47714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Koch Enterprises Inc.Occupation
Executive Vice President

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 20 | | 2014 |

Transaction ID : SA11AI.16329

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Howard A. Nevins

Mailing Address 5233 Jenner Road

City State Zip Code
Boonville IN 47601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Trey ExplorationOccupation
President

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2014 |

Transaction ID : SA11AI.16444

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Mr. David W. Nicholson

Mailing Address 8634 Briarrose Court

City State Zip Code
Newburgh IN 47630-3158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Merrill LynchOccupation
Financial Advisor

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 05 | | 2014 |

Transaction ID : SA11AI.16408

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 65

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Dr. Ray W. Nicholson Jr.

Mailing Address 801 Cobblestone Drive

City

Evansville

State

IN

Zip Code

47715

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Physician - Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16386

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Nichols Operating LLC

Mailing Address 8157 S. 100 W

City

Ft. Branch

State

IN

Zip Code

47648

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16379

Amount of Each Receipt this Period

500.00

Partnership

C.

Full Name (Last, First, Middle Initial)

Mrs. Debra A. Nichols

Mailing Address 8157 S 100 W

City

Ft. Branch

State

IN

Zip Code

47648

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nichols Operating LLC

Occupation

Owner

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16379.0

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

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

750.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Mr. Thomas W. Nichols

Mailing Address 8157 S 100 W

City

Ft. Branch

State

IN

Zip Code

47648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nichols Operating LLCOccupation
Owner

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16379.1

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mr. Jon Ed Nicoson

Mailing Address 2075 W. CR 100 S

City

Cory

State

IN

Zip Code

47846

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nicoson Farms, Inc.Occupation
Farmer

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 22 | | 2014 |

Transaction ID : SA11AI.16543

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mr. E. Wayne Parke

Mailing Address 5415 Winthrop Court

City

Evansville

State

IN

Zip Code

47715

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 13 | | 2014 |

Transaction ID : SA11AI.16440

Amount of Each Receipt this Period

250.00

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

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

750.00

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

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

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Mrs. Gayle Pettinga

Mailing Address PO Box 3203

City

Evansville

State

IN

Zip Code

47731

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gerling Law Offices

Occupation

Attorney

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 20 | | 2014 |

Transaction ID : SA11Al.16331

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

B. Ms. L. Faye Powell

Mailing Address 1101 Suwannee Drive

City

Evansville

State

IN

Zip Code

47725

FEC ID number of contributing
federal political committee.

C

Name of Employer

BeautiControl Cosmetics

Occupation

National Exec. Director

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 20 | | 2014 |

Transaction ID : SA11Al.16335

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Jonathan D. Rich

Mailing Address 1335 Tall Timbers Drive

City

Evansville

State

IN

Zip Code

47725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Berry Plastics

Occupation

CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 17 | | 2014 |

Transaction ID : SA11Al.16490

Amount of Each Receipt this Period

1000.00

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

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

3850.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Ronald D. Romain
Mailing Address 10500Wilmington Drive

City State Zip Code
Evansville IN 47725

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Companies

Occupation
President & CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y
05 20 2014

Transaction ID : SA11AI.16337

Amount of Each Receipt this Period

2600.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark S. Samila
Mailing Address 1471 Audubon Drive

City State Zip Code
Evansville IN 47715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kahn Dees Donovan Kahn

Occupation
Attorney

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
06 05 2014

Transaction ID : SA11AI.16412

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Mr. G. Michael Schopmeyer
Mailing Address 862 S. Lombard Avenue

City State Zip Code
Evansville IN 47714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kahn Dees Donovan & Kahn

Occupation
Attorney

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 13 2014

Transaction ID : SA11AI.16437

Amount of Each Receipt this Period

250.00

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

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

3100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Mrs. Diane M. Schroeder

Mailing Address 1106 Harrelton Court

City

Evansville

State

IN

Zip Code

47714

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 20 | | 2014 |

Transaction ID : SA11Al.16342

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

B. Mr. Richard A. Schroeder

Mailing Address 1911 Anderson Road

City

Newburgh

State

IN

Zip Code

47630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cresline Plastic Pipe Co., Inc.

Occupation

President

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 20 | | 2014 |

Transaction ID : SA11Al.16336

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Mr. Kenan L. SchultheisMailing Address 32 N. Weinbach Avenue
PO Box 2728

City

Evansville

State

IN

Zip Code

47728-0728

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schultheis Insurance

Occupation

Owner

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11Al.16387

Amount of Each Receipt this Period

500.00

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

5700.00

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

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

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

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Mr. Eric H. Schwenker

Mailing Address 100 NW 1st Street

Apt. 302

City

Evansville

State

IN

Zip Code

47708-1257

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 05 | | 2014 |

Transaction ID : SA11AI.16401

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mrs. Debra K. Seger

Mailing Address 1986 Emily Street

City

Jasper

State

IN

Zip Code

47546

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 20 | | 2014 |

Transaction ID : SA11AI.16340

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Mr. Andrew M. Shore

Mailing Address 5904 North 22nd Street

City

Arlington

State

VA

Zip Code

22205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jochum Shore & Trossevin PC

Occupation

Attorney

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 25 | | 2014 |

Transaction ID : SA11AI.16550

Amount of Each Receipt this Period

500.00

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

1750.00

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

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

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

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(check only one)

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| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Mrs. Lori A. Smith

Mailing Address 1600 Skipping Stone Drive

City

Evansville

State

IN

Zip Code

47725

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 05 | | 2014 |

Transaction ID : SA11AI.16403

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Mr. Charles E. Taylor Jr.

Mailing Address PO Box 713

City

Washington

State

IN

Zip Code

47501-0713

FEC ID number of contributing
federal political committee.

C

Name of Employer

C.E. Taylor Oil, Inc.

Occupation

President

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16389

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Dr. Richard A. Tibbals

Mailing Address 5535 Autumn Ridge Drive

City

Newburgh

State

IN

Zip Code

47630-3286

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwest Ear Nose & Throat Surg

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

850.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 30 | | 2014 |

Transaction ID : SA11AI.16383

Amount of Each Receipt this Period

250.00

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

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

3850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Mrs. Janina K. Watson

Mailing Address 13858 E. Hwy 150

City

Wheatland

State

IN

Zip Code

47597

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 17 | | 2014 |

Transaction ID : SA11Al.16488

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mr. Michael J. Weber

Mailing Address 3307 Stringtown Road

City

Evansville

State

IN

Zip Code

47711

FEC ID number of contributing
federal political committee.

C

Name of Employer

AmHealth Inc.

Occupation

Accountant

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2014 |

Transaction ID : SA11Al.16453

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mr. Stephan E. Weitzel

Mailing Address 236 E. Buena Vista Road

City

Evansville

State

IN

Zip Code

47711

FEC ID number of contributing
federal political committee.

C

Name of Employer

ZiemerStaymanWeitzelShoulders

Occupation

Attorney

Receipt For: 2500

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 05 | | 2014 |

Transaction ID : SA11Al.16404

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

750.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial)
Ms. Linda E. White
 Mailing Address 5505 Timberlake Court

City State Zip Code
 Evansville IN 47710

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Deaconess Hospital

Occupation
 CEO

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 06 05 2014

Transaction ID : SA11AI.16398

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles C. Williams
 Mailing Address 1062 E. 200 N.

City State Zip Code
 Washington IN 47501

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Williams Bros

Occupation
 CEO

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 06 30 2014

Transaction ID : SA11AI.16532

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)
Mr. John F. Williams
 Mailing Address 9560 Copley Drive

City State Zip Code
 Indianapolis IN 46260

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Hall Render Killian HeathLyman

Occupation
 Attorney

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 05 09 2014

Transaction ID : SA11AI.16313

Amount of Each Receipt this Period

250.00

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

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

2250.00

62600.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial)
ALCOA INC EMPLOYEES' VOLUNTARY POLITICAL ACTION COMMITTEE

Mailing Address 1909 K STREET, NW
 SUITE 300

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20006 |

FEC ID number of contributing
federal political committee.

C C00501106

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 02 | | 2014 |

Transaction ID : SA11C.16277

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF NEUROLOGY PROFESSIONAL ASSOCIATION BRAINPAC

Mailing Address 509B 2ND ST NE LOWER LEVEL

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20002 |

FEC ID number of contributing
federal political committee.

C C00435933

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 06 | | 2014 |

Transaction ID : SA11C.16325

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC)

Mailing Address 725 FIFTEENTH ST., NW SUITE 500

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20005 |

FEC ID number of contributing
federal political committee.

C C00413955

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 05 | | 2014 |

Transaction ID : SA11C.16301

Amount of Each Receipt this Period

500.00

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

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

2500.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial)
 AMERICAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS POLITICAL ACTION COMMITTEE

A. Mailing Address 9700 West Bryn Mawr Ave.

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Rosemont | IL | 60018 |

FEC ID number of contributing federal political committee.

C C00005660

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : SA11C.16344

Amount of Each Receipt this Period

3000.00

B. Full Name (Last, First, Middle Initial)
 AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
 SUITE 600

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20036 |

FEC ID number of contributing federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11C.16316

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
 AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 Preston White Drive

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Reston | VA | 20191 |

FEC ID number of contributing federal political committee.

C C00343459

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

9000.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11C.16536

Amount of Each Receipt this Period

1000.00

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

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

5000.00

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

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

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| | | | | |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 | <input type="checkbox"/> 15 |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC

Mailing Address **20 F ST NW, STE 1000**
ATTN: SARA MORSE

| | | |
|---------------------------|--------------------|--------------------------|
| City WASHINGTON | State DC | Zip Code 20001 |
|---------------------------|--------------------|--------------------------|

FEC ID number of contributing
federal political committee.

C **C00382424**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 05 / 01 / 2014 |

Transaction ID : SA11C.16272

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN PSYCHIATRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address **1000 Wilson Boulevard**
Suite 1825

| | | |
|--------------------------|--------------------|--------------------------|
| City Arlington | State VA | Zip Code 22209 |
|--------------------------|--------------------|--------------------------|

FEC ID number of contributing
federal political committee.

C **C00373696**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 05 / 03 / 2014 |

Transaction ID : SA11C.16276

Amount of Each Receipt this Period

3000.00

C. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address **208 S. AKARD STREET**
SUITE 2701

| | | |
|-----------------------|--------------------|--------------------------|
| City DALLAS | State TX | Zip Code 75202 |
|-----------------------|--------------------|--------------------------|

FEC ID number of contributing
federal political committee.

C **C00109017**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 05 / 20 / 2014 |

Transaction ID : SA11C.16334

Amount of Each Receipt this Period

1000.00

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

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

6500.00

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

Use separate schedule(s)
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(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

A.

Mailing Address P.O. BOX 961039

City

FORT WORTH

State

TX

Zip Code

76161

FEC ID number of contributing
federal political committee.

C C00235739

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 02 | | 2014 |

Transaction ID : SA11C.16278

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE ('BSC PAC')

B.

Mailing Address ONE BOSTON SCIENTIFIC PLACE

City

NATICK

State

MA

Zip Code

01760

FEC ID number of contributing
federal political committee.

C C00357863

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 20 | | 2014 |

Transaction ID : SA11C.16339

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE, THE

C.

Mailing Address 100 N.E. Adams

City

Peoria

State

IL

Zip Code

61629

FEC ID number of contributing
federal political committee.

C C00148031

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 06 | | 2014 |

Transaction ID : SA11C.16323

Amount of Each Receipt this Period

1000.00

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

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

4000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 65

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Mailing Address 550 SOUTH TRYON STREET

City State Zip Code
CHARLOTTE NC 28202

FEC ID number of contributing
federal political committee.

C C00083535

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y
06 30 2014

Transaction ID : SA11C.16597

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Mailing Address LILLY CORPORATE CENTER

City State Zip Code
INDIANAPOLIS IN 46285

FEC ID number of contributing
federal political committee.

C C00082792

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
05 29 2014

Transaction ID : SA11C.16367

Amount of Each Receipt this Period

2000.00

C. Full Name (Last, First, Middle Initial)
FAEGREBD CONSULTING PAC

Mailing Address 300 N. MERIDIAN STREET
SUITE 2700

City State Zip Code
INDIANAPOLIS IN 46204

FEC ID number of contributing
federal political committee.

C C00386904

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y
05 02 2014

Transaction ID : SA11C.16279

Amount of Each Receipt this Period

1000.00

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

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

4000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 65

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

Friends for Vaneta Becker

Mailing Address 4017 Cobblefield Drive

City

Evansville

State

IN

Zip Code

47711

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

150.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11C.16449

Amount of Each Receipt this Period

150.00

Received from a permissible source

Full Name (Last, First, Middle Initial)

HOME DEPOT INC. POLITICAL ACTION COMMITTEE, THE

Mailing Address 101 Constitution Ave. NW

Suite 800 West

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00284885

Name of Employer

Occupation

Receipt For: 2014

☒ Primary
☐ Other (specify)

☐ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11C.16322

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave. NW

Suite 500 West

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

2055.84

Date of Receipt

M M / D D / Y Y Y Y
06 / 05 / 2014

Transaction ID : SA11C.16397

Amount of Each Receipt this Period

1000.00

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

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

3150.00

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

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

FOR LINE NUMBER:

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(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14TH STREET, NW
SUITE 800

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20005 |

FEC ID number of contributing
federal political committee.

C C00236489

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 06 | | 2014 |

Transaction ID : SA11C.16324

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MAJORITY COMMITTEE PAC--MC PAC

Mailing Address P.O. BOX 10134

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| BAKERSFIELD | CA | 93389 |

FEC ID number of contributing
federal political committee.

C C00428052

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 02 | | 2014 |

Transaction ID : SA11C.16280

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Mailing Address ONE POST STREET
34TH FLOOR

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| SAN FRANCISCO | CA | 94104 |

FEC ID number of contributing
federal political committee.

C C00108035

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 02 | | 2014 |

Transaction ID : SA11C.16281

Amount of Each Receipt this Period

4000.00

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

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

10000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 33 OF 65

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Mailing Address **ONE POST STREET**

34TH FLOOR

City

SAN FRANCISCO

State

CA

Zip Code

94104

FEC ID number of contributing
federal political committee.

C **C00108035**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

05 / **06** / **2014**

Transaction ID : SA11C.16315

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address **2901 TELESTAR CT.**

City

FALLS CHURCH

State

VA

Zip Code

22042

FEC ID number of contributing
federal political committee.

C **C00005249**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

05 / **06** / **2014**

Transaction ID : SA11C.16311

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address **430 North Michigan Avenue**

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C **C00030718**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

04 / **30** / **2014**

Transaction ID : SA11C.16267

Amount of Each Receipt this Period

1000.00

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

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

4000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 65

| | | | | |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 | <input type="checkbox"/> 15 |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial)
 NATIONAL FEDERATION OF INDEPENDENT BUSINESS/ SAVE AMERICAS FREE ENTERPRISE TRUST

A.

Mailing Address 1201 F St. NW
 Suite 200

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20004 |
|--------------------|-------------|-------------------|

FEC ID number of contributing
federal political committee.

C C00101105

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 06 / 05 / 2014 |

Transaction ID : SA11C.16396

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC

Mailing Address 1605 King Street

| | | |
|--------------------|-------------|-------------------|
| City Alexandria | State VA | Zip Code 22314 |
|--------------------|-------------|-------------------|

FEC ID number of contributing
federal political committee.

C C00089458

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 05 / 30 / 2014 |

Transaction ID : SA11C.16368

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

OLD NATIONAL BANK PAC

Mailing Address 1 Main Street

| | | |
|--------------------|-------------|-------------------|
| City Evansville | State IN | Zip Code 47708 |
|--------------------|-------------|-------------------|

FEC ID number of contributing
federal political committee.

C C00165282

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

4600.00

Date of Receipt

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 06 / 05 / 2014 |

Transaction ID : SA11C.16407

Amount of Each Receipt this Period

2600.00

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

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

4600.00

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial)
 OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOIDA-PAC)

A.

Mailing Address **PO BOX 1000**
1 NW OOIDA DR.

City State Zip Code
GRAIN VALLEY MO 64029

FEC ID number of contributing
federal political committee.

C **C00236778**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

05 / 09 / 2014

Transaction ID : SA11C.16321

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
PRICewaterhouseCOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address **1301 K STREET, NW**
SUITE 800W

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C **C00107235**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

05 / 30 / 2014

Transaction ID : SA11C.16374

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address **C/O G&W 2201 WISCONSIN AVE., NW**
SUITE 320

City State Zip Code
WASHINGTON DC 20007

FEC ID number of contributing
federal political committee.

C **C00165159**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

06 / 13 / 2014

Transaction ID : SA11C.16450

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 36 OF 65

| | | | | |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 | <input type="checkbox"/> 15 |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial)
REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address **C/O G&W 2201 WISCONSIN AVE., NW**
SUITE 320

City **WASHINGTON** State **DC** Zip Code **20007**

FEC ID number of contributing federal political committee. **C C00165159**

Name of Employer _____ Occupation _____

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify) _____

Election Cycle-to-Date
8000.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11C.16535

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

Mailing Address **20 F STREET, NW**
SUITE 310 C

City **WASHINGTON** State **DC** Zip Code **20001-6704**

FEC ID number of contributing federal political committee. **C C00325936**

Name of Employer _____ Occupation _____

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) _____

Election Cycle-to-Date
5000.00

Date of Receipt

05 / 05 / 2014

Transaction ID : SA11C.16299

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
THE BABCOCK & WILCOX COMPANY POLITICAL ACTION COMMITTEE (B&W PAC)

Mailing Address **2016 MT. ATHOS ROAD**

City **LYNCHBURG** State **VA** Zip Code **24504**

FEC ID number of contributing federal political committee. **C C00365502**

Name of Employer _____ Occupation _____

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify) _____

Election Cycle-to-Date
3000.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11C.16598

Amount of Each Receipt this Period

2000.00

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

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

5500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 37 OF 65

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC

Mailing Address **601 THIRTEENTH STREET NW**
STE 910 S

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20005 |

FEC ID number of contributing federal political committee.

C **C00542365**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

05 / **06** / **2014**

Transaction ID : **SA11C.16320**

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
VECTREN CORPORATION EMPLOYEES FEDERAL PAC

Mailing Address **Vectren Corporation Treasury Dept.**
One Vectren Square

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Evansville | IN | 47708 |

FEC ID number of contributing federal political committee.

C **C00240069**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3250.00

Date of Receipt

06 / **13** / **2014**

Transaction ID : **SA11C.16443**

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
WELLPOINT, INC. WELLPAC

Mailing Address **120 Monument Circle**

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Indianapolis | IN | 46204 |

FEC ID number of contributing federal political committee.

C **C00197228**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

05 / **30** / **2014**

Transaction ID : **SA11C.16373**

Amount of Each Receipt this Period

3000.00

Refunded 6/17/14

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

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

5000.00

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

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

FOR LINE NUMBER:

PAGE 38 OF 65

(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

WELLPOINT, INC. WELLPAC

Mailing Address 120 Monument Circle

City

Indianapolis

State

IN

Zip Code

46204

FEC ID number of contributing
federal political committee.

C C00197228

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 30 | | 2014 |

Transaction ID : SA11C.16537

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00147173

Name of Employer

Occupation

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

3500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 02 | | 2014 |

Transaction ID : SA11C.16283

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

Amount of Each Receipt this Period

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

3000.00

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

60250.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. BKD, LLP

Mailing Address PO Box 22127

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Louisville | KY | 40252-0127 |

Purpose of Disbursement
Bookkeeping fees

001

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 05 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1163.75 |
|---------|

Transaction ID : SB17.16303

B. BKD, LLP

Mailing Address PO Box 22127

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Louisville | KY | 40252-0127 |

Purpose of Disbursement
Bookkeeping fees

001

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1410.75 |
|---------|

Transaction ID : SB17.16364

c. Dr. Kathryn Bucshon

Mailing Address 10211 Lincoln Avenue

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Newburgh | IN | 47630 |

Purpose of Disbursement
Vendor itemization follows as required

002

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 650.00 |
|--------|

Transaction ID : SB17.16310

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3224.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Dr. Kathryn Bucshon

Mailing Address 10211 Lincoln Avenue

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 13 | | 2014 |

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Newburgh | IN | 47630 |

Amount of Each Disbursement this Period

| |
|--------|
| 106.40 |
|--------|

Purpose of Disbursement
Mileage Reimbursement

002

Transaction ID : SB17.16310.0

Candidate Name

Bucshon for CongressCategory/
Type**[MEMO ITEM]**

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

B. The Congressional Club

Mailing Address 2001 New Hampshire Ave. NW

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 13 | | 2014 |

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20009 |

Amount of Each Disbursement this Period

| |
|--------|
| 150.00 |
|--------|

Purpose of Disbursement
Dues

001

Transaction ID : SB17.16310.2

Candidate Name

Bucshon for CongressCategory/
Type**[MEMO ITEM]**

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

c. Delta Air Lines

Mailing Address PO Box 20706

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 13 | | 2014 |

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Atlanta | GA | 30320-6001 |

Amount of Each Disbursement this Period

| |
|--------|
| 323.60 |
|--------|

Purpose of Disbursement
Air Fare Reimbursement

002

Transaction ID : SB17.16310.3

Candidate Name

Bucshon for CongressCategory/
Type**[MEMO ITEM]**

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|------|
| 0.00 |
|------|

| |
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| |
|--|

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Dr. Kathryn Bucshon

Mailing Address 10211 Lincoln Avenue

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 30 | | 2014 |

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Newburgh | IN | 47630 |

Amount of Each Disbursement this Period

| |
|--------|
| 625.56 |
|--------|

Purpose of Disbursement
Vendor itemization follows as required

002

Transaction ID : SB17.16514

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

B. Schnuck's Markets

Mailing Address 8301 Bell Oaks Drive

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 30 | | 2014 |

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Newburgh | IN | 47630 |

Amount of Each Disbursement this Period

| |
|--------|
| 587.65 |
|--------|

Purpose of Disbursement
Catering

003

Transaction ID : SB17.16514.0

[MEMO ITEM]

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

c. Card Services Center

Mailing Address PO Box 105025

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 17 | | 2014 |

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Atlanta | GA | 30348-5025 |

Amount of Each Disbursement this Period

| |
|--------|
| 320.90 |
|--------|

Purpose of Disbursement
Credit Card Payment - Vendor Itemization Follows As Required

002

Transaction ID : SB17.16253

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

946.46

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
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| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. BiaggisMailing Address 6401 E. Lloyd Expressway
#3City State Zip Code
Evansville IN 47715Purpose of Disbursement
Campaign Meals

001

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 17 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 69.09 |
|-------|

Transaction ID : SB17.16253.0

[MEMO ITEM]

B. Capitol Hill Club

Mailing Address 300 1st Street SE

City State Zip Code
Washington DC 20003-1891Purpose of Disbursement
Campaign Meals

002

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 17 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 142.52 |
|--------|

Transaction ID : SB17.16253.1

[MEMO ITEM]

c. Card Services Center

Mailing Address PO Box 105025

City State Zip Code
Atlanta GA 30348-5025Purpose of Disbursement
Campaign Meals

002

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 05 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 64.78 |
|-------|

Transaction ID : SB17.16287

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

64.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Card Services Center

Mailing Address PO Box 105025

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Atlanta | GA | 30348-5025 |

Purpose of Disbursement
Credit Card Payment - Vendor Itemization Follows As Required

002

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 02 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 298.44 |
|--------|

Transaction ID : SB17.16346

B. Capitol Hill Club

Mailing Address 300 1st Street SE

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Washington | DC | 20003-1891 |

Purpose of Disbursement
Campaign Meals

002

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 17 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 12.67 |
|-------|

Transaction ID : SB17.16346.0

[MEMO ITEM]

c. Card Services Center

Mailing Address PO Box 105025

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Atlanta | GA | 30348-5025 |

Purpose of Disbursement
Credit Card Payment - Vendor Itemization Follows As Required

002

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 17 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1383.82 |
|---------|

Transaction ID : SB17.16461

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1682.26

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Priceline.com Inc.

Mailing Address 800 Connecticut Avenue

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Norwalk | CT | 06854 |

Purpose of Disbursement
Lodging

002

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 17 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 322.87 |
|--------|

Transaction ID : SB17.16461.1

[MEMO ITEM]**B. Enterprise Rent A Car**

Mailing Address 5220 Division Street

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Evansville | IN | 47715 |

Purpose of Disbursement
Car Rental

002

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 17 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 244.18 |
|--------|

Transaction ID : SB17.16461.3

[MEMO ITEM]**C. Motomart #3202**

Mailing Address 6328 E. Lloyd Expressway

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Evansville | IN | 47715 |

Purpose of Disbursement
Fuel

002

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 17 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 70.55 |
|-------|

Transaction ID : SB17.16461.4

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|------|
| 0.00 |
|------|

| |
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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Shell Oil

Mailing Address 1342 N. Washington Street

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 17 | | 2014 |

| | | |
|------|-------|----------|
| City | State | Zip Code |
| Dale | IN | 47523 |

Amount of Each Disbursement this Period

| |
|--------|
| 101.64 |
|--------|

Purpose of Disbursement
Fuel

002

Transaction ID : SB17.16461.6

[MEMO ITEM]

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

B. Card Services Center

Mailing Address PO Box 105025

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 17 | | 2014 |

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Atlanta | GA | 30348-5025 |

Amount of Each Disbursement this Period

| |
|-------|
| 84.84 |
|-------|

Purpose of Disbursement
Credit Card Fees

001

Transaction ID : SB17.16461.8

[MEMO ITEM]

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

C. GODADDY.COMMailing Address 14455 North Hayden Road
Suite 219

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 17 | | 2014 |

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Scottsdale | AZ | 85260 |

Amount of Each Disbursement this Period

| |
|--------|
| 253.60 |
|--------|

Purpose of Disbursement
Web Site

004

Transaction ID : SB17.16461.10

[MEMO ITEM]

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
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| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Clay County GOP

Mailing Address PO Box 721

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 03 | | 2014 |

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Brazil | IN | 47834 |

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement
Event Tickets/Facility Fees

004

Transaction ID : SB17.16354

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

B. CMDIMailing Address 1593 Spring Hill Road
Suite 400

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 17 | | 2014 |

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Tysons Corner | VA | 22182 |

Amount of Each Disbursement this Period

| |
|--------|
| 798.00 |
|--------|

Purpose of Disbursement
Software Services

001

Transaction ID : SB17.16483

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

c. Cybersource Corporation

Mailing Address 1295 Charleston Road

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 06 | | 2014 |

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Mountain View | CA | 94043 |

Amount of Each Disbursement this Period

| |
|-------|
| 34.95 |
|-------|

Purpose of Disbursement
Credit Card Processing Fees

003

Transaction ID : SB17.16305

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1832.95

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Cybersource Corporation

Mailing Address 1295 Charleston Road

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Mountain View | CA | 94043 |

Purpose of Disbursement
Credit Card Processing Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 02 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 34.95 |
|-------|

Transaction ID : SB17.16415

B. EC Consulting LLC

Mailing Address 526 6th Street SE

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003 |

Purpose of Disbursement
Fundraising Consultant Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1071.20 |
|---------|

Transaction ID : SB17.16363

c. Gateway Billing

Mailing Address 808 East Utah Valley Drive

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| American Fork | UT | 84003 |

Purpose of Disbursement
Credit Card Processing Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 06 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Transaction ID : SB17.16304

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1126.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Gateway Billing

Mailing Address 808 East Utah Valley Drive

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 02 | | 2014 |

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| American Fork | UT | 84003 |

Amount of Each Disbursement this Period

| |
|----------------------|
| 12345678901234567890 |
| 20.00 |

Purpose of Disbursement
Credit Card Processing Fees

003

Transaction ID : SB17.16416

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

B. Joe Wellman for Washington CommitteeMailing Address 314 E. Main Street
c/o Alan Goodwin

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 09 | | 2014 |

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | IN | 47501 |

Amount of Each Disbursement this Period

| |
|----------------------|
| 12345678901234567890 |
| 400.00 |

Purpose of Disbursement
Event Tickets/Facility Fees

004

Transaction ID : SB17.16427

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. Just Rennie's

Mailing Address 100 S.E. 4th Street

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 05 | | 2014 |

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Evansville | IN | 47708 |

Amount of Each Disbursement this Period

| |
|----------------------|
| 12345678901234567890 |
| 1276.84 |

Purpose of Disbursement
Event - Catering

003

Transaction ID : SB17.16366

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1696.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Mr. Connor LentzMailing Address 420 Lodge Avenue
Apt 1City State Zip Code
Evansville IN 47714Purpose of Disbursement
Mileage reimbursement

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 05 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 751.52 |
|--------|

Transaction ID : SB17.16365

B. Mr. Michael Marinaccio

Mailing Address 680 Sunnypond Lane

City State Zip Code
Aynor SC 29511Purpose of Disbursement
Graphic Design

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 09 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

Transaction ID : SB17.16430

c. Merchant Service c/o Old National Bank

Mailing Address PO Box 718

City State Zip Code
Evansville IN 47705Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 06 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Transaction ID : SB17.16306

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1036.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Merchant Service c/o Old National Bank

Mailing Address PO Box 718

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Evansville | IN | 47705 |

Purpose of Disbursement
Credit Card Processing Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 06 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 41.00 |
|-------|

Transaction ID : SB17.16307

B. Merchant Service c/o Old National Bank

Mailing Address PO Box 718

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Evansville | IN | 47705 |

Purpose of Disbursement
Credit Card Processing Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Transaction ID : SB17.16417

C. Merchant Service c/o Old National Bank

Mailing Address PO Box 718

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Evansville | IN | 47705 |

Purpose of Disbursement
Credit Card Processing Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 41.00 |
|-------|

Transaction ID : SB17.16418

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

117.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. MO Strategies LLCMailing Address 101 West Ohio
Suite 1180

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
Fundraising Consultant Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 4644.60 |
|---------|

Transaction ID : SB17.16309

B. Piryx Inc.Mailing Address 144 2nd Street
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 30 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 29.00 |
|-------|

Transaction ID : SB17.16260

c. Piryx Inc.Mailing Address 144 2nd Street
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 22 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 22.50 |
|-------|

Transaction ID : SB17.16573

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4696.10

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 22 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 2.25 |
|------|

Transaction ID : SB17.16593

B. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 23 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 1.13 |
|------|

Transaction ID : SB17.16574

c. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 23 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 4.50 |
|------|

Transaction ID : SB17.16575

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|------|
| 7.88 |
|------|

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 25 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 4.50 |
|------|

Transaction ID : SB17.16576

B. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 25 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 4.50 |
|------|

Transaction ID : SB17.16577

c. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 25 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 22.50 |
|-------|

Transaction ID : SB17.16578

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

31.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 25 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 4.50 |
|------|

Transaction ID : SB17.16579

B. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 25 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 4.50 |
|------|

Transaction ID : SB17.16580

c. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 26 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 22.50 |
|-------|

Transaction ID : SB17.16581

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

31.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 27 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 1.13 |
|------|

Transaction ID : SB17.16582

B. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 27 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 2.25 |
|------|

Transaction ID : SB17.16583

c. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 27 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 2.25 |
|------|

Transaction ID : SB17.16584

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|------|
| 5.63 |
|------|

| |
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| |
|--|

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 29 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 2.25 |
|------|

Transaction ID : SB17.16585

B. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 30 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 4.50 |
|------|

Transaction ID : SB17.16586

c. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 30 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 4.50 |
|------|

Transaction ID : SB17.16587

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 30 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 4.50 |
|------|

Transaction ID : SB17.16588

B. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 30 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 2.25 |
|------|

Transaction ID : SB17.16589

c. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Candidate Name

Bucshon for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 30 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 2.25 |
|------|

Transaction ID : SB17.16590

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|------|
| 9.00 |
|------|

| |
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| |
|--|

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 30 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 11.25 |
|-------|

Transaction ID : SB17.16591

B. Piryx Inc.Mailing Address 144 2nd Street
1st FloorCity State Zip Code
San Francisco CA 94105Purpose of Disbursement
Credit Card Fees

003

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 30 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 2.25 |
|------|

Transaction ID : SB17.16592

c. Rising Tide Media Group LLC

Mailing Address 226 S. Fayette

City State Zip Code
Alexandra VA 22314Purpose of Disbursement
Media advertising

004

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 16 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 5500.00 |
|---------|

Transaction ID : SB17.16434

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5513.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Tabco

Mailing Address PO Box 3400

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 05 | | 2014 |

| | | |
|-------------|-------|------------|
| City | State | Zip Code |
| Terre Haute | IN | 47803-0400 |

Amount of Each Disbursement this Period

| |
|---------|
| 1024.66 |
|---------|

Purpose of Disbursement
Fundraiser Mailing

003

Transaction ID : SB17.16284

Candidate Name

Bucshon for CongressCategory/
Type

| | | | | |
|----------------|--|-------------------|--|----------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) | <input type="checkbox"/> General |
|----------------|--|-------------------|--|----------------------------------|

State: IN District: 08

Full Name (Last, First, Middle Initial)

B. The Prosper Group CorporationMailing Address 435 E. Main Street
Suite 250

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 21 | | 2014 |

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Greenwood | IN | 46143 |

Amount of Each Disbursement this Period

| |
|----------|
| 15000.00 |
|----------|

Purpose of Disbursement
Website Hosting

004

Transaction ID : SB17.16257

Candidate Name

Bucshon for CongressCategory/
Type

| | | | | |
|----------------|--|-------------------|--|----------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) | <input type="checkbox"/> General |
|----------------|--|-------------------|--|----------------------------------|

State: IN District: 08

Full Name (Last, First, Middle Initial)

c. The Prosper Group CorporationMailing Address 435 E. Main Street
Suite 250

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 16 | | 2014 |

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Greenwood | IN | 46143 |

Amount of Each Disbursement this Period

| |
|---------|
| 4170.51 |
|---------|

Purpose of Disbursement
Website Hosting

004

Transaction ID : SB17.16327

Candidate Name

Bucshon for CongressCategory/
Type

| | | | | |
|----------------|--|-------------------|--|----------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) | <input type="checkbox"/> General |
|----------------|--|-------------------|--|----------------------------------|

State: IN District: 08

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

20195.17

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. The Prosper Group CorporationMailing Address 435 E. Main Street
Suite 250

City Greenwood State IN Zip Code 46143

Purpose of Disbursement
Website Hosting

004

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 12 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1792.10 |
|---------|

Transaction ID : SB17.16433

B. USINCUBATOR, LLCMailing Address 815 John Street
Suite 110

City Evansville State IN Zip Code 47713

Purpose of Disbursement
Rent

001

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 01 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 260.00 |
|--------|

Transaction ID : SB17.16261

c. USINCUBATOR, LLCMailing Address 815 John Street
Suite 110

City Evansville State IN Zip Code 47713

Purpose of Disbursement
Rent

001

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 02 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 260.00 |
|--------|

Transaction ID : SB17.16345

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2312.10

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 65

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 25505

| | | |
|---------------|-------|------------|
| City | State | Zip Code |
| Lehigh Valley | PA | 18002-5505 |

Purpose of Disbursement
Cell Phone Usage

001

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 07 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 213.78 |
|--------|

Transaction ID : SB17.16326

B. Verizon Wireless

Mailing Address PO Box 25505

| | | |
|---------------|-------|------------|
| City | State | Zip Code |
| Lehigh Valley | PA | 18002-5505 |

Purpose of Disbursement
Cell Phone Usage

001

Category/
Type

Candidate Name

Bucshon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: IN District: 08

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 09 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 213.78 |
|--------|

Transaction ID : SB17.16429

C.

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
| | | |

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

427.56

44968.65

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 65

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| LONE TREE | CO | 80124 |

Purpose of Disbursement
Campaign Contribution

011

Category/
Type

Candidate Name

CORY GARDNER

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: CO District: 00

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 24 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Transaction ID : SB21.16500

B. Crawford County Republican Party

Mailing Address 571 South Cedar Street

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Marengo | IN | 47140 |

Purpose of Disbursement
Non-federal donation

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 09 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Transaction ID : SB21.16423

C. FAMILIES FOR JAMES LANKFORD

Mailing Address PO BOX 1639

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| BETHANY | OK | 73008 |

Purpose of Disbursement
Campaign Contribution

011

Category/
Type

Candidate Name

JAMES PAUL LANKFORD

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: OK District: 00

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 30 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

Transaction ID : SB21.16264

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 65

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bucshon for Congress

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SUZANNE CROUCH

Mailing Address PO Box 2960

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 09 | | 2014 |

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Indianapolis | IN | 46206 |

Amount of Each Disbursement this Period

| |
|----------|
| 51000.00 |
|----------|

Purpose of Disbursement
Non-federal donation

011

Transaction ID : SB21.16422

Candidate Name

Category/
Type

Office Sought:

| | |
|--------------------------|-----------|
| <input type="checkbox"/> | House |
| <input type="checkbox"/> | Senate |
| <input type="checkbox"/> | President |

Disbursement For: 2014

| | |
|--|---|
| <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) | |

State:

District:

Full Name (Last, First, Middle Initial)

B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 20 | | 2014 |

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20003 |

Amount of Each Disbursement this Period

| |
|----------|
| 40000.00 |
|----------|

Purpose of Disbursement
transfer

011

Transaction ID : SB21.16328

Candidate Name

Category/
Type

Office Sought:

| | |
|--------------------------|-----------|
| <input type="checkbox"/> | House |
| <input type="checkbox"/> | Senate |
| <input type="checkbox"/> | President |

Disbursement For:

| | |
|--|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) | |

State:

District:

Full Name (Last, First, Middle Initial)

C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 20 | | 2014 |

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20003 |

Amount of Each Disbursement this Period

| |
|----------|
| 10000.00 |
|----------|

Purpose of Disbursement
transfer

011

Transaction ID : SB21.16496

Candidate Name

Category/
Type

Office Sought:

| | |
|--------------------------|-----------|
| <input type="checkbox"/> | House |
| <input type="checkbox"/> | Senate |
| <input type="checkbox"/> | President |

Disbursement For:

| | |
|--|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) | |

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

51000.00

