

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

ADDRESS (number and street) ONE INVACARE WAY  
 Check if different than previously reported. (ACC)  
ELYRIA OH 44035

2. **FEC IDENTIFICATION NUMBER** C00249896  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 11 28 2006 through 12 31 2006

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 Jerome E. Fox, Jr.

Signature of Treasurer Electronically Filed by Jerome E. Fox, Jr. Date 01 31 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		18050.44
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	8027.02									
(c) Total Receipts (from Line 19) .....	4620.52	48417.86								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	12647.54	66468.30								
7. Total Disbursements (from Line 31) .....	1003.16	54823.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	11644.38	11644.38								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4241.94	37592.34
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	347.46	8272.66
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4589.40	45865.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	4589.40	45865.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	31.12	552.86
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	4620.52	48417.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4620.52	48417.86

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	1000.00	50250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	13.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	13.00
29. Other Disbursements.....	3.16	4560.92
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1003.16	54823.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	1003.16	54823.92

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	4589.40	45865.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	13.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4589.40	45852.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial) <b>A. Cara Bachenheimer</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 7413 Burtonwood Drive		<b>Transaction ID: SA11A1.6510</b>	
City State Zip Code Alexandria VA 22307	Amount of Each Receipt this Period 249.99		
FEC ID number of contributing federal political committee. C	Biweekly PR ded \$83.33 start 11/30/06		
Name of Employer Invacare Corporation	Occupation VP Government Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1999.92		

Full Name (Last, First, Middle Initial) <b>B. Gerald Blouch</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 1823 Arlington Road		<b>Transaction ID: SA11A1.6511</b>	
City State Zip Code Westlake OH 44145	Amount of Each Receipt this Period 624.99		
FEC ID number of contributing federal political committee. C	Biweekly PR ded \$208.33 start 11/30/06		
Name of Employer Invacare Corporation	Occupation President & COO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.92		

Full Name (Last, First, Middle Initial) <b>C. Robert Boeye</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 30926 Inverness Circle		<b>Transaction ID: SA11A1.6512</b>	
City State Zip Code Westlake OH 44145	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Biweekly PR ded \$10 start 11/30/06		
Name of Employer Invacare Corporation	Occupation VP, National Accounts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	904.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial) <b>A. Agnes Marian Brushaber</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 36892 Chestnut Ridge Road		<b>Transaction ID: SA11A1.6516</b>
City North Ridgeville	State OH	Zip Code 44039
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.00
Name of Employer Invacare Corporation	Occupation Project Manager	Biweekly PR ded \$25 start 11/30/06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. William Corcoran</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 572 Masters Lane		<b>Transaction ID: SA11A1.6519</b>
City Avon Lake	State OH	Zip Code 44012
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
Name of Employer Invacare Corporation	Occupation VP Treasury	Biweekly PR ded \$20 start 11/30/06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C. Roger Crayton</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 1061 W. 38th Street		<b>Transaction ID: SA11A1.6520</b>
City Lorain	State OH	Zip Code 44053
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer Invacare Corporation	Occupation Sr. Technical Architect	Biweekly PR ded \$10 start 11/30/06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial) <b>A.</b> John Dmytriw		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 7439 Lauren J Drive		Transaction ID: SA11A1.6522	
City State Zip Code Mentor OH 44060	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C	Biweekly PR ded \$50 start 11/30/06		
Name of Employer Occupation Invacare Corporation Director Operations	Aggregate Year-to-Date ▼ 1120.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Brian Ellacott		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 335 Green Jacket Court		Transaction ID: SA11A1.6523	
City State Zip Code Avon Lake OH 44012	Amount of Each Receipt this Period 49.98		
FEC ID number of contributing federal political committee. C	Biweekly PR ded \$16.66 start 11/30/06		
Name of Employer Occupation Invacare Corporation Group VP, Rehab	Aggregate Year-to-Date ▼ 266.56		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Jerome E. Fox, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 26114 Cobblestone Trail		Transaction ID: SA11A1.6525	
City State Zip Code Columbia Station OH 44028	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Biweekly PR ded \$25 start 11/30/06		
Name of Employer Occupation Invacare Corporation VP - Corporate Tax	Aggregate Year-to-Date ▼ 700.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	274.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial) <b>A. Thomas Herb</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 376 County Road 40		<b>Transaction ID: SA11A1.6527</b>
City Sullivan	State OH	Zip Code 44880
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer Invacare Corporation	Occupation Manager - Corporate Documentation	Biweekly PR ded \$10 start 11/30/06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) <b>B. Cassie Johnston</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 25577 Peppermill Creek Dr.		<b>Transaction ID: SA11A1.6529</b>
City Porter	State TX	Zip Code 77365
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer Invacare Corporation	Occupation Territory Business Manager	Biweekly PR ded \$10 start 11/30/06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>C. Mark Kline</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 4488 Regal Circle		<b>Transaction ID: SA11A1.6531</b>
City Akron	State OH	Zip Code 44321
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.00
Name of Employer Invacare Corporation	Occupation Director Retail Sales	Biweekly PR ded \$25 start 11/30/06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	135.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

**A.** Full Name (Last, First, Middle Initial)  
Judith Kovacs

Mailing Address 5341 Sturbridge Court

City Sheffield Village State OH Zip Code 44054

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

Name of Employer Invacare Corporation Occupation VP Customer Service

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.6532

Amount of Each Receipt this Period  
45.00

Biweekly PR ded \$15 start 11/30/06

**B.** Full Name (Last, First, Middle Initial)  
Dale Laporte

Mailing Address 23224 Winged Foot Drive

City Westlake State OH Zip Code 44145

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

Name of Employer Invacare Corporation Occupation SR VP and General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.6533

Amount of Each Receipt this Period  
150.00

Biweekly PR ded \$50 start 11/30/06

**C.** Full Name (Last, First, Middle Initial)  
Javier Ledesma

Mailing Address 7134 Highway 107

City Mission State TX Zip Code 78574

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

Name of Employer Invacare Corporation Occupation Director Operations - Invamex

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.6534

Amount of Each Receipt this Period  
30.00

Biweekly PR ded \$10 start 11/30/06

**SUBTOTAL** of Receipts This Page (optional) ..... ► 225.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

**A.** Full Name (Last, First, Middle Initial)  
Phillip Maxwell

Mailing Address 19723 Stoughton Drive

City State Zip Code  
Strongsville OH 44136

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

Name of Employer Occupation  
Invacare Corporation Manufacturing Manager - TS Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.6536

Amount of Each Receipt this Period  
30.00

Biweekly PR ded \$10 start 11/30/06

**B.** Full Name (Last, First, Middle Initial)  
Roland Mentessi

Mailing Address 8540 Oakwood Lane

City State Zip Code  
N. Royalton OH 44133

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

Name of Employer Occupation  
Invacare Corporation Engineering Supervisor - Rehab

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.6538

Amount of Each Receipt this Period  
30.00

Biweekly PR ded \$10 start 11/30/06

**C.** Full Name (Last, First, Middle Initial)  
Matthew Mullarkey

Mailing Address 29844 Lake Road

City State Zip Code  
Bay Village OH 44140

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

Name of Employer Occupation  
Invacare Corporation VP Global Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.6539

Amount of Each Receipt this Period  
300.00

Biweekly PR ded \$100 start 11/30/06

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>360.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC**

<b>A.</b> Full Name (Last, First, Middle Initial) Russell Pizzuto		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 32310 Seneca Drive		<b>Transaction ID:</b> SA11A1.6540	
City State Zip Code Solon OH 44139	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Biweekly PR ded \$25 start 11/30/06		
Name of Employer Invacare Corporation	Occupation Director of Engineering		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Gretchen Schuler		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 28710 Berkshire Drive		<b>Transaction ID:</b> SA11A1.6542	
City State Zip Code North Olmsted OH 44070	Amount of Each Receipt this Period 63.00		
FEC ID number of contributing federal political committee. C	Biweekly PR ded \$21 start 11/30/06		
Name of Employer Invacare Corporation	Occupation Director of Litigation Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Gregory Shook		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 33252 Heartwood		<b>Transaction ID:</b> SA11A1.6544	
City State Zip Code Avon OH 44011	Amount of Each Receipt this Period 24.00		
FEC ID number of contributing federal political committee. C	Biweekly PR ded \$8 start 11/30/06		
Name of Employer Invacare Corporation	Occupation Sr. Mgr. - Sales Admin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	162.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Louis FJ Slangen		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 39 Twin Oaks Drive		<b>Transaction ID:</b> SA11A1.6545	
City State Zip Code Akron OH 44313		Amount of Each Receipt this Period 624.99	
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly PR ded \$208.33 start 11/30/06	
Name of Employer Occupation Invacare Corporation Sr. VP Sales & Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4999.92	

Full Name (Last, First, Middle Initial) <b>B.</b> Dennis Snyder		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address Shanghai Racquet Club		<b>Transaction ID:</b> SA11A1.6546	
City State Zip Code Shanghai ZZ		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly PR ded \$100 start 11/30/06	
Name of Employer Occupation Invacare Corporation Director Operations - China			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1800.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Patricia Stump		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 1009 Jonathan Street		<b>Transaction ID:</b> SA11A1.6547	
City State Zip Code Amherst OH 44001		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		Biweekly PR ded \$10 start 11/30/06	
Name of Employer Occupation Invacare Corporation Director Human Resources			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	954.99
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

**A.** Full Name (Last, First, Middle Initial)  
Mark Sullivan

Mailing Address 707 Lincoln Street

City Amherst State OH Zip Code 44001

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

Name of Employer Invacare Corporation Occupation Director Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.6548

Amount of Each Receipt this Period  
30.00

Biweekly PR ded \$10 start 11/30/06

**B.** Full Name (Last, First, Middle Initial)  
Gregory Thompson

Mailing Address 2337 Beaver Creek

City Westlake State OH Zip Code 44145

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

Name of Employer Invacare Corporation Occupation Chief Financial Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3333.28

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.6549

Amount of Each Receipt this Period  
624.99

Biweekly PR ded \$208.33 start 11/30/06

**C.** Full Name (Last, First, Middle Initial)  
Thomas Tuckowski

Mailing Address 563 Eastland Road

City Berea State OH Zip Code 44017

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

Name of Employer Invacare Corporation Occupation Engineering Director - Rehab

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.6550

Amount of Each Receipt this Period  
30.00

Biweekly PR ded \$10 start 11/30/06

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	684.99
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial) <b>A. Joseph Usaj</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6		
Mailing Address 520 Woodland Court		<b>Transaction ID: SA11A1.6551</b>		
City State Zip Code Chagrin Falls OH 44022	Amount of Each Receipt this Period 150.00		Biweekly PR ded \$50 start 11/30/06	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Invacare Corporation	Occupation Vice President - Human Resources			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00			

Full Name (Last, First, Middle Initial) <b>B. William Wokety</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6		
Mailing Address 7769 Kinsman		<b>Transaction ID: SA11A1.6552</b>		
City State Zip Code Novelty OH 44072	Amount of Each Receipt this Period 30.00		Biweekly PR ded \$10 start 11/30/06	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Invacare Corporation	Occupation Director NA Operations Acctg.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00			

Full Name (Last, First, Middle Initial) <b>C. Chris Yessayan</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6		
Mailing Address 1904 Bordeaux Way		<b>Transaction ID: SA11A1.6553</b>		
City State Zip Code Westlake OH 44145	Amount of Each Receipt this Period 120.00		Biweekly PR ded \$40 start 11/30/06	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Invacare Corporation	Occupation VP & GM, Services Business Unit			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 16 / 19	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC**

**A.** Full Name (Last, First, Middle Initial)  
 John Zabalo

Mailing Address 6141 SW 16 Street

City State Zip Code  
 Miami FL 33155

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

Name of Employer Occupation  
 Invacare Corporation Territory Business Manager

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.6554

Amount of Each Receipt this Period  
 75.00

Biweekly PR ded \$25 start  
 11/30/06

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	4241.94



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 17 / 19	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC**

**A.** Full Name (Last, First, Middle Initial)  
 National City Bank

Mailing Address P.O. Box 5756

City Cleveland State OH Zip Code 44101

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**552.86**

Date of Receipt  
 M M / D D / Y Y Y Y  
**1 2 / 0 1 / 2 0 0 6**

Transaction ID: SA17.6557

Amount of Each Receipt this Period  
**31.12**

Interest earned through  
 Nov 30, 2006

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>31.12</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>31.12</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial)

**A.** STEPHANIE TUBBS JONES FOR US CONGRESS

Mailing Address 3729 SILSBY RD

City UNIVERSITY HEIGHTS State OH Zip Code 44118

Purpose of Disbursement  
Fundraising event of Dec 12

Candidate Name  
STEPHANIE TUBBS JONES FOR US CONGRESS

Office Sought:  House  
 Senate  
 President

State: OH District: 11

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.6555

Date of Disbursement

MM / DD / YYYY  
12 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Full Name (Last, First, Middle Initial)

**A.** National City Bank

Mailing Address P.O. Box 5756

City Cleveland State OH Zip Code 44101

Purpose of Disbursement  
Sweep fee through Nov 30, 2006

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB29.6558

Date of Disbursement

12 / 06 / 2006

Amount of Each Disbursement this Period

3.16

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

3.16

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

3.16