

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2015 AUG -3 AM 11:50
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

CASS COUNTY REPUBLICAN CENTRAL COMMITTEE

ADDRESS (number and street)

P.O. Box 791

Check if different
than previously
reported. (ACC)

LOGANSPORT

IN

46947

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00020453

3. IS THIS
REPORT

X 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
Year-End Report (YE)

X 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

Primary (12P)

General (12G)

Runoff (12R)

PRE-Election

Report for the:

Convention (12C)

Special (12S)

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

01 01 2015

through

06 30 2015

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

DAVID RICHEY

Signature of Treasurer



Date

07 28 2015

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 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Cass Co Central Committee

Report Covering the Period: From: ^{M M / D D / Y Y Y Y}
01 01 2015

To: ^{M M / D D / Y Y Y Y}
06 30 2015

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, ^{Y Y Y Y} <i>2015</i>		<i>58,660.53</i>
(b) Cash on Hand at Beginning of Reporting Period.....	<i>, 58,660.53</i>	
(c) Total Receipts (from Line 19)	<i>, 4,169.52</i>	<i>, 4,169.52</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<i>, 62,830.05</i>	<i>, 62,830.05</i>
7. Total Disbursements (from Line 31)	<i>, 4,704.30</i>	<i>, 4,704.30</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<i>, 58,125.75</i>	<i>, 58,125.75</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<i>, ,</i>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<i>, ,</i>	

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Cass Co Republican Central Committee

Report Covering the Period:

From:

01 01 2015

To:

06 30 2015

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

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

(ii) Unitemized.....

(iii) TOTAL (add
Lines 11(a)(i) and (ii)..... ▶

(b) Political Party Committees.....

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

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5)..... ▶

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

17. Other Federal Receipts

(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

4,169.52

4,169.52

4,169.52

4,169.52

4,169.52

4,169.52

4,169.52

4,169.52

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	,	,
(ii) Non-Federal Share.....	,	,
(b) Other Federal Operating Expenditures	4,704.30	4,704.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4,704.30	4,704.30
22. Transfers to Affiliated/Other Party Committees.....	,	,
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	,	,
24. Independent Expenditures (use Schedule E)	,	,
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	,	,
26. Loan Repayments Made.....	,	,
27. Loans Made.....	,	,
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	,	,
(b) Political Party Committees	,	,
(c) Other Political Committees (such as PACs).....	,	,
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	,	,
29. Other Disbursements	,	,
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	,	,
(ii) "Levin" Share.....	,	,
(b) Federal Election Activity Paid Entirely With Federal Funds	,	,
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	,	,
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4,704.30	4,704.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4,704.30	4,704.30

Page 5

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)	4,169.52	4,169.52
34. Total Contribution Refunds (from Line 28(d))	0.	0.
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4,169.52	4,169.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4,704.30	4,704.30
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.	0.
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4,704.30	4,704.30

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 1 OF 5

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

CASS Co Central Committee

Full Name (Last, First, Middle Initial)

A. POSTMASTER

Mailing Address

406 9th St

City

LOGANSPOUT

State

IN

Zip Code

46947

Purpose of Disbursement

Mailing - OFFICE

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

01 / 13 / 2015

Amount of Each Disbursement this Period

719

B. CASS Co Republican Holding Corp

Mailing Address

PO Box 791

City

LOGANSPOUT

State

IN

Zip Code

46947

Purpose of Disbursement

RENT

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

01 / 13 / 2015

Amount of Each Disbursement this Period

1500.00

C. BEACON CREDIT UNION

Mailing Address

PO Box 627

City

Wabash

State

IN

Zip Code

46992-0627

Purpose of Disbursement

New CD ACCOUNT

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

01 / 28 / 2015

Amount of Each Disbursement this Period

2500

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

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

1532.19

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 2 OF 5

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CASS Co Republican Central Committee

Full Name (Last, First, Middle Initial)

A. Postmaster

Mailing Address

406 9th St

City

Logansport

State

IN

Zip Code

46947

Purpose of Disbursement

Mailing

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

01 / 30 / 2015

Amount of Each Disbursement this Period

683

B. Comcast

Mailing Address

41112 Concept Dr

City

Plymouth

State

MI

Zip Code

48170-4233

Purpose of Disbursement

Phone

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

01 / 28 / 2015

Amount of Each Disbursement this Period

1029

C. McCord's Do It Best

Mailing Address

2865 E Market St

City

Logansport

State

IN

Zip Code

46947

Purpose of Disbursement

Decorations - Lincoln Day

Candidate Name

003

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

02 / 23 / 2015

Amount of Each Disbursement this Period

85.59

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

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

10871

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 3 OF 5

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Cass Co Republican Central Committee

Full Name (Last, First, Middle Initial)

A. <i>Comcast</i>		Date of Disbursement	
Mailing Address <i>4112 Concept Dr</i>		<i>02 / 28 / 2015</i>	
City <i>Plymouth MI</i>	State <i>MI</i>	Zip Code <i>48170 - 4253</i>	
Purpose of Disbursement <i>Phone</i>	Category/Type <i>001</i>		Amount of Each Disbursement this Period <i>6682</i>
Candidate Name			
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:			

B. <i>Cass Co Extension Office</i>		Date of Disbursement	
Mailing Address <i>200 COURT PARK Room 302</i>		<i>02 / 24 / 2015</i>	
City <i>Logansport IN</i>	State <i>IN</i>	Zip Code <i>46947</i>	
Purpose of Disbursement <i>LINCOLN Day - Hall Rental</i>	Category/Type <i>003</i>		Amount of Each Disbursement this Period <i>2115.00</i>
Candidate Name			
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:			

C. <i>Cass Co Chamber of Commerce</i>		Date of Disbursement	
Mailing Address <i>311 S 5th St</i>		<i>03 / 25 / 2015</i>	
City <i>Logansport IN</i>	State <i>IN</i>	Zip Code <i>46947</i>	
Purpose of Disbursement <i>Memberships</i>	Category/Type <i>001</i>		Amount of Each Disbursement this Period <i>120.00</i>
Candidate Name			
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).....▶

2301.82

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 4 OF 5

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Cass Co Republican Central Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

03 / 28 / 2015

A.

Com CAST

Mailing Address

4112 Concept Dr

City

Plymouth

MI

State

Zip Code

48170 - 4253

Purpose of Disbursement

Phone

Candidate Name

001

Category/
Type

Amount of Each Disbursement this Period

6682

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

04 / 24 / 2015

B.

Cass Co 4H Club Association

Mailing Address

200 Court Park, Room 302

City

Logansport

IN

State

Zip Code

46947

Purpose of Disbursement

Fair Booth Rental

Candidate Name

003

Category/
Type

Amount of Each Disbursement this Period

27500

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

04 / 28 / 2015

C.

Com CAST

Mailing Address

4112 Concept Dr

City

Plymouth, MI

State

Zip Code

48170 - 4253

Purpose of Disbursement

Phone

Candidate Name

001

Category/
Type

Amount of Each Disbursement this Period

6692

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

40874

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

**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 5 OF 5

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Cash Co Republican Central Committee

Full Name (Last, First, Middle Initial)

A. *Comcast*

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Phone

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

05 / 28 / 2015

Amount of Each Disbursement this Period

6692

B. *Post Master*

Mailing Address

406 9th St

City

State

Zip Code

Purpose of Disbursement

Bulk Mailing

Candidate Name

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

06 / 27 / 2015

Amount of Each Disbursement this Period

22500

C. *Comcast*

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Phone

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

06 / 28 / 2015

Amount of Each Disbursement this Period

6692

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

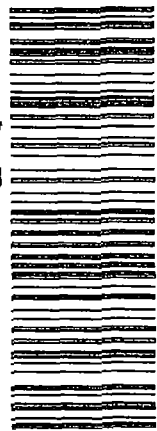
TOTAL This Period (last page this line number only).....▶

3588.4

4704.30

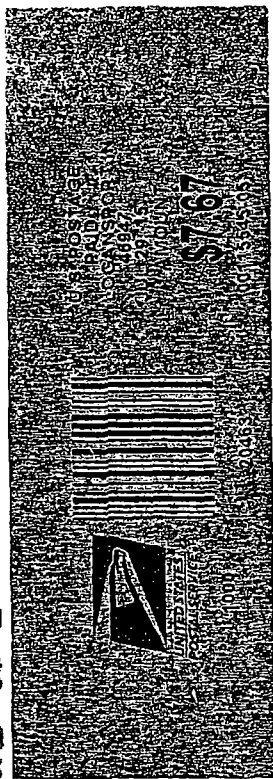
791

10 46947



7015 0920 0001 0468 0586


RETURN RECEIPT
REQUESTED



FEDERAL ELECTION COMMISSION
999 E. STREET NW
WASHINGTON DC 20463

RECEIVED
FEC MAIL CENTER
2015 AUG -3 AM 11:50

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7/29/15
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (3/2015)	8/3/15 DATE PREPARED

20150803 10:00:00