

# 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  
Indiana Democratic Congressional Victory Committee

ADDRESS (number and street) One North Capitol, Suite 200  
 Check if different than previously reported. (ACC)  
Indianapolis IN 46204

2. **FEC IDENTIFICATION NUMBER** C00108613  
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 09 01 2006 through 09 30 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 Mrs Linda M Buzinec

Signature of Treasurer Electronically Filed by Mrs Linda M Buzinec Date 03 07 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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Indiana Democratic Congressional Victory Committee

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

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		321912.73
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	289405.09									
(c) Total Receipts (from Line 19) .....	354518.05	1781630.90								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	643923.14	2103543.63								
7. Total Disbursements (from Line 31) .....	332955.76	1792576.25								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	310967.38	310967.38								
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  
Indiana Democratic Congressional Victory Committee

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

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	20650.00	123549.52
(i) Itemized (use Schedule A) .....	680.00	35314.00
(ii) Unitemized .....	21330.00	158863.52
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	22825.26	68925.26
(c) Other Political Committees (such as PACs) .....	44155.26	227788.78
(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 .....	137000.00	296438.61
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) .....	85468.05	503751.81
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	2735.29
17. Other Federal Receipts (Dividends, Interest, etc.) .....	515.85	23367.23
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	87378.89	727549.18
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	87378.89	727549.18
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	354518.05	1781630.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	267139.16	1054081.72

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	23227.30	194966.39
(ii) Non-Federal Share.....	87378.89	760545.58
(b) Other Federal Operating Expenditures.....	98092.99	564979.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	208699.18	1520491.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	115000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10000.00
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	0.00
(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	0.00
29. Other Disbursements.....	0.00	20000.00
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 .....	124256.58	127084.87
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	124256.58	127084.87
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	332955.76	1792576.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	245576.87	1032030.67

**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) .....	44155.26	227788.78
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	44155.26	227788.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	121320.29	759945.80
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	85468.05	503751.81
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	35852.24	256193.99

**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 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Ms. Dora May Abel

Mailing Address 2008 Blue Ridge Dr

City State Zip Code  
Terre Haute IN 47802

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

Name of Employer Occupation  
retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 14 / 2006

**Transaction ID:** SA11A1.54458

Amount of Each Receipt this Period  
95.00

IN Party Victory Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Dr. Albert Allen

Mailing Address 5201 Mc Henry Ln

City State Zip Code  
Indianapolis IN 46228

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

Name of Employer Occupation  
Eli Lilly & Co Physician Scientist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 25 / 2006

**Transaction ID:** SA11A1.54469

Amount of Each Receipt this Period  
190.00

IN Party Victory Fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Dr. Albert Allen

Mailing Address 5201 Mc Henry Ln

City State Zip Code  
Indianapolis IN 46228

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

Name of Employer Occupation  
Eli Lilly & Co Physician Scientist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 24 / 2006

**Transaction ID:** SA11A1.54468

Amount of Each Receipt this Period  
95.00

IN Party Victory Fund

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 7 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
James Andrews

Mailing Address 3111 N Ramble Rd W

City State Zip Code  
Bloomington IN 47408

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

Name of Employer Occupation  
Indiana University Emmeritus Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2006

Transaction ID: SA11A1.54479

Amount of Each Receipt this Period  
475.00

IN Party Victory Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Robert G Barcus

Mailing Address 2230 Brewster Rd

City State Zip Code  
Indianapolis IN 46260

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2006

Transaction ID: SA11A1.54472

Amount of Each Receipt this Period  
95.00

IN Party Victory Fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert G Barcus

Mailing Address 2230 Brewster Rd

City State Zip Code  
Indianapolis IN 46260

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
MM / DD / YYYY  
09 / 12 / 2006

Transaction ID: SA11A1.54471

Amount of Each Receipt this Period  
95.00

IN Party Victory Fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 8 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Philp D. Beer II

Mailing Address 380 E 226th St

City State Zip Code  
Sheridan IN 46069

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

Name of Employer Occupation  
USI Consultants, Inc Engineer/Surveyor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2100.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 11 / 2006

Transaction ID: SA11A1.54260

Amount of Each Receipt this Period  
2100.00

conradopen

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph T. Bradley

Mailing Address 645 E North Shore Drive

City State Zip Code  
Brownstown IN 47220

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

Name of Employer Occupation  
IBEX Engineering Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2006

Transaction ID: SA11A1.54253

Amount of Each Receipt this Period  
2000.00

fed coord.

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Betsy Clark

Mailing Address 1500 Middle Ridge Dr.

City State Zip Code  
Willow Spring NC 27592

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

Name of Employer Occupation  
KCI Technologies Business Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 07 / 2006

Transaction ID: SA11A1.54259

Amount of Each Receipt this Period  
1250.00

GoldCircle

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5350.00
<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 9 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol St. SE

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2006

Transaction ID: SA11A1.54490

Amount of Each Receipt this Period  
 13950.75

IN Party Victory Fund Uni-temized

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
MARSHALL HANLEY

Mailing Address 7421 GLENMORA RIDGE RD

City INDIANAPOLIS State IN Zip Code 46250

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

Name of Employer Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 31 / 2006

Transaction ID: SA11A1.54492

Amount of Each Receipt this Period  
 150.00

Dollars for Democrats

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Peter Michael Harris

Mailing Address 430 N Park Ave Apt 303

City Indianapolis State IN Zip Code 46202

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

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 28 / 2006

Transaction ID: SA11A1.54477

Amount of Each Receipt this Period  
 285.00

IN Party Victory Fund

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
RICHARD HICKMAN

Mailing Address 1478 E MAUMEE ST

City State Zip Code  
ANGOLA IN 46703

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

Name of Employer Occupation  
REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.54494

Amount of Each Receipt this Period  
150.00

Dollars for Democrats

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
RICHARD HICKMAN

Mailing Address 1478 E MAUMEE ST

City State Zip Code  
ANGOLA IN 46703

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

Name of Employer Occupation  
REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.54495

Amount of Each Receipt this Period  
150.00

Dollars for Democrats

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marsha Hutchins

Mailing Address 5354 N. Park Ave.

City State Zip Code  
Indianapolis IN 46220

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

Name of Employer Occupation  
none Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 12 / 2006

Transaction ID: SA11A1.54485

Amount of Each Receipt this Period  
237.50

IN Party Victory Fund

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 11 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
M D Bernard P Kemker

Mailing Address 1510 Fidel Ln

City Jasper State IN Zip Code 47546

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 14 / 2006

Transaction ID: SA11A1.54476

Amount of Each Receipt this Period  
285.00

IN Party Victory Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
CATHERINE KIMBERLING

Mailing Address 1232 IMPERIAL DR

City KOKOMO State IN Zip Code 46902

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

Name of Employer Occupation REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
07 / 28 / 2006

Transaction ID: SA11A1.54497

Amount of Each Receipt this Period  
150.00

Dollars for Democrats

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
June Knight

Mailing Address 4142 Indianapolis Blvd

City East Chicago State IN Zip Code 46312

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
07 / 13 / 2006

Transaction ID: SA11A1.54466

Amount of Each Receipt this Period  
52.25

IN Party Victory Fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 12 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
June Knight

Mailing Address 4142 Indianapolis Blvd

City State Zip Code  
East Chicago IN 46312

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 12 / 2006

Transaction ID: SA11A1.54467

Amount of Each Receipt this Period  
52.25

IN Party Victory Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Alan Lobley

Mailing Address 4535 N. Park Ave

City State Zip Code  
Indianapolis IN 45205

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

Name of Employer Occupation  
Retired lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 14 / 2006

Transaction ID: SA11A1.54489

Amount of Each Receipt this Period  
237.50

IN Party Victory Fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ted Lucas

Mailing Address 1125 Constitution Dr

City State Zip Code  
Edinburgh IN 46124

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

Name of Employer Occupation  
Milestone, Inc President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.54281

Amount of Each Receipt this Period  
2000.00

fed coord.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2000.00</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 13 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Carolene Mays		Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006	
Mailing Address 2901 N Tacoma Ave		Transaction ID: SA11A1.54481	
City Indianapolis	State IN	Zip Code 46218	Amount of Each Receipt this Period 285.00
FEC ID number of contributing federal political committee. <b>C</b>		IN Party Victory Fund	
Name of Employer State of Indiana	Occupation State Representative District 94		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B.</b> Mr Kevin Charles Murray		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2006	
Mailing Address 990 Ellenberger Pkwy West Dr		Transaction ID: SA11A1.54288	
City Indianapolis	State IN	Zip Code 46219	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		Asherwood	
Name of Employer Locke Reynolds	Occupation attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Lisa Murray		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2006	
Mailing Address 10 W Market St 500 Mkt Tower		Transaction ID: SA11A1.54275	
City Indianapolis	State IN	Zip Code 46204	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>		Asherwood	
Name of Employer Hays Murray Group, LLC	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1500.00
<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 14 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Ms. Lois W Newman

Mailing Address 1313 Woodbrooke Dr

City State Zip Code  
New Castle IN 47362

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
08 / 24 / 2006

Transaction ID: SA11A1.54474

Amount of Each Receipt this Period  
190.00

IN Party Victory Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mr. Alan T Nolan

Mailing Address 3307 Bay Road North Dr

City State Zip Code  
Indianapolis IN 46240

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

Name of Employer Occupation  
Self Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
07 / 24 / 2006

Transaction ID: SA11A1.54456

Amount of Each Receipt this Period  
142.50

IN Party Victory Fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mr. Alan T Nolan

Mailing Address 3307 Bay Road North Dr

City State Zip Code  
Indianapolis IN 46240

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

Name of Employer Occupation  
Self Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 14 / 2006

Transaction ID: SA11A1.54457

Amount of Each Receipt this Period  
142.50

IN Party Victory Fund

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</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 15 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael B. O'Connor

Mailing Address 543 N Audubon Rd

City Indianapolis State IN Zip Code 46219

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

Name of Employer Bose Treacy Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 820.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 07 / 2006

Transaction ID: SA11A1.54257

Amount of Each Receipt this Period  
 800.00

conradopen

**B.** Full Name (Last, First, Middle Initial)  
NANCY PAPAS

Mailing Address 9549 SUMMER RIDGE PL

City INDIANAPOLIS State IN Zip Code 46260

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

Name of Employer Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2006

Transaction ID: SA11A1.54499

Amount of Each Receipt this Period  
 100.00

Dollars for Democrats

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mr. Roger Paradiack

Mailing Address 4181 S Summit Lane

City Columbus State IN Zip Code 47201

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

Name of Employer Paradiack Lawfirm Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2006

Transaction ID: SA11A1.54284

Amount of Each Receipt this Period  
 1000.00

fed coord.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1800.00
<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 16 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Adrien L Ringuette

Mailing Address 17445 County Road 10

City Bristol State IN Zip Code 46507

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

Name of Employer Self Employed Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
07 / 13 / 2006

Transaction ID: SA11A1.54453

Amount of Each Receipt this Period  
285.00

IN Party Victory Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mr. Adrien L Ringuette

Mailing Address 17445 County Road 10

City Bristol State IN Zip Code 46507

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

Name of Employer Self Employed Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
08 / 24 / 2006

Transaction ID: SA11A1.54454

Amount of Each Receipt this Period  
475.00

IN Party Victory Fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mr. John R Sheedy

Mailing Address 97 Lookout Ridge Dr

City Columbus State IN Zip Code 47201

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
08 / 31 / 2006

Transaction ID: SA11A1.54460

Amount of Each Receipt this Period  
95.00

IN Party Victory Fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 17 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. John H Shoaff

Mailing Address 3604 S WASHINGTON RD

City State Zip Code  
FORT WAYNE IN 46802

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

Name of Employer Self Occupation Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
08 / 31 / 2006

Transaction ID: SA11A1.54464

Amount of Each Receipt this Period  
199.50

IN Party Victory Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Thomas L Siddall

Mailing Address 1925 S 900 E

City State Zip Code  
Zionsville IN 46077

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

Name of Employer Occupation Chemist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
08 / 24 / 2006

Transaction ID: SA11A1.54462

Amount of Each Receipt this Period  
285.00

IN Party Victory Fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mr. Herbert Simon

Mailing Address 8765 Pine Ridge Dr

City State Zip Code  
Indianapolis IN 46260

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

Name of Employer Simon DeBartolo Group Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
09 / 11 / 2006

Transaction ID: SA11A1.54261

Amount of Each Receipt this Period  
10000.00

fed coord.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<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 18 / 87
	<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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
CONRAD STINSON

Mailing Address 1664 HERNDON DR

City State Zip Code  
EVANSVILLE IN 47711

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

Name of Employer Occupation  
REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 11 / 2006

Transaction ID: SA11A1.54501

Amount of Each Receipt this Period  
150.00

Dollars for Democrats

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
UNITEMIZED CONTRIBUTIONS

Mailing Address 430 S CAPITOL ST SE

City State Zip Code  
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2006

Transaction ID: SA11A1.54502

Amount of Each Receipt this Period  
43816.13

Dollars for Democrats

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
J Todd Weingart

Mailing Address 1874 S Walnut Dr

City State Zip Code  
Warsaw IN 46580

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

Name of Employer Occupation  
Man Financial Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 31 / 2006

Transaction ID: SA11A1.54483

Amount of Each Receipt this Period  
95.00

IN Party Victory Fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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:		PAGE 19 / 87	
	(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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Ms. Gloria Westfall

Mailing Address 800 Bell Trace Cir Apt 326

City	State	Zip Code
Bloomington	IN	47408

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

Name of Employer	Occupation
	Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	1	/	2	0	0	6

Transaction ID: SA11A1.54487

Amount of Each Receipt this Period

IN Party Victory Fund

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="20650.00"/>

**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 20 / 87
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. American Federation of Teachers COPE S/L</b>		Date of Receipt MM / DD / YYYY 09 / 16 / 2006
Mailing Address 555 New Jersey Ave NW		<b>Transaction ID: SA11C.54523</b>
City Washington State DC Zip Code 20001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Blue Dog Political Action Committee</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 6849 Old Dominion Dr, Ste 222		<b>Transaction ID: SA11C.54518</b>
City McLean State VA Zip Code 22101	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. IBEW Educational Committee</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 900 Seventh Street NW		<b>Transaction ID: SA11C.54535</b>
City Washington State DC Zip Code 20001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>11000.00</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: PAGE 21 / 87  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
National Air Traffic Controllers Assoc.  
Mailing Address 1325 Massachusetts Ave NW  
City State Zip Code  
Washington DC 20005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006  
Transaction ID: SA11C.54533  
Amount of Each Receipt this Period  
5000.00  
contribution

**B.** Full Name (Last, First, Middle Initial)  
Southern Indiana Victory Fund  
Mailing Address I N Capitol Ave, Suite 200  
Suite 200  
City State Zip Code  
Indianapolis IN 46204  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
8325.26

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006  
Transaction ID: SA11C.54531  
Amount of Each Receipt this Period  
1825.26  
contribution

**C.** Full Name (Last, First, Middle Initial)  
UAW V CAP  
Mailing Address 8000 E Jefferson Ave  
City State Zip Code  
Detroit MI 48214  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 14 / 2006  
Transaction ID: SA11C.54513  
Amount of Each Receipt this Period  
5000.00  
contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>11825.26</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>22825.26</b>

**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 22 / 87
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A.</b> ASDC - Dollars for Democrats		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006
Mailing Address 430 S Capitol St SE		<b>Transaction ID:</b> SA12.54291
City Washington State DC Zip Code 20003	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 10000.00
Name of Employer Information Requested	Occupation Information Requested	dollarsfordem
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> ASDC - Dollars for Democrats		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006
Mailing Address 430 S Capitol St SE		<b>Transaction ID:</b> SA12.54292
City Washington State DC Zip Code 20003	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	dollarsfordem
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 21000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Democratic Congressional Camp. Comm.		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address 430 S Capitol St SE		<b>Transaction ID:</b> SA12.54503
City Washington State DC Zip Code 20003	FEC ID number of contributing federal political committee. <b>C</b> C00000935	Amount of Each Receipt this Period 106000.00
Name of Employer	Occupation	transfer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 106000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>117000.00</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:		PAGE 23 / 87	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003

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

Name of Employer Democratic National Commi Occupation Political Committee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	6

Transaction ID: SA12.54278

Amount of Each Receipt this Period  
20000.00

Non-event

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	20000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	137000.00

**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 24 / 87
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Committee to Bring Back Baron</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006	
Mailing Address P O Box 1071		<b>Transaction ID: SA15.54520</b>	
City State Zip Code Seymour IN 47274	Amount of Each Receipt this Period 9364.38		
FEC ID number of contributing federal political committee. <b>C</b> C00411835	offset to operation expenses/payroll		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 52259.04		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Donnelly for Congress Committee</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2006	
Mailing Address PO Box 1961		<b>Transaction ID: SA15.54527</b>	
City State Zip Code South Bend IN 46634	Amount of Each Receipt this Period 12675.48		
FEC ID number of contributing federal political committee. <b>C</b> C00393652	offset to operating expenses		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 47425.78		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Ellsworth for Congress Committee</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2006	
Mailing Address 111 NW 4th Street		<b>Transaction ID: SA15.54529</b>	
City State Zip Code Evansville IN 47708	Amount of Each Receipt this Period 24599.56		
FEC ID number of contributing federal political committee. <b>C</b> C00412346	offset to operating expenses/payroll		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 149577.46		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	46639.42
<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 25 / 87
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. EVAN BAYH COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006
Mailing Address 10 W. Market St. Ste 2100		<b>Transaction ID: SA15.54511</b>
City State Zip Code Indianapolis IN 46204	Amount of Each Receipt this Period 7664.27	
FEC ID number of contributing federal political committee. <b>C</b> C00306860	offset to operating expenses	
Name of Employer Information Requested Occupation Information Requested	Aggregate Year-to-Date ▼ 33064.93	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Julia Carson for Congress</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006
Mailing Address One N Capitol Ave, Suite 200		<b>Transaction ID: SA15.54505</b>
City State Zip Code Indianapolis IN 46204	Amount of Each Receipt this Period 7395.83	
FEC ID number of contributing federal political committee. <b>C</b>	offset to operating expenses/payroll	
Name of Employer United States Congress Occupation Congresswoman	Aggregate Year-to-Date ▼ 52631.35	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Marion County Democratic Central Cmte</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006
Mailing Address 603 E Washington Street, Suite 100		<b>Transaction ID: SA15.54507</b>
City State Zip Code Indianapolis IN 46204	Amount of Each Receipt this Period 5032.66	
FEC ID number of contributing federal political committee. <b>C</b>	offset to operating expenses/payroll	
Name of Employer Political Organization Occupation Political Organization	Aggregate Year-to-Date ▼ 122502.71	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	20092.76
<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 26 / 87
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Marion County Democratic Central Cmte		Date of Receipt M M / D D / Y Y Y Y Y 09 / 11 / 2006
Mailing Address 603 E Washington Street, Suite 100		<b>Transaction ID:</b> SA15.54508
City State Zip Code Indianapolis IN 46204	Amount of Each Receipt this Period 11314.29	
FEC ID number of contributing federal political committee. C	offset operating expense/- payroll	
Name of Employer Political Organization Occupation Political Organization	Aggregate Year-to-Date ▼ 133817.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Tom Hayhurst for Congress Committee		Date of Receipt M M / D D / Y Y Y Y Y 09 / 11 / 2006
Mailing Address 8026 Manor Drive		<b>Transaction ID:</b> SA15.54525
City State Zip Code Fort Wayne IN 46825	Amount of Each Receipt this Period 7421.58	
FEC ID number of contributing federal political committee. C	offset to operating expense/payroll	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 32087.61	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	18735.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	85468.05

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 27 / 87	
	(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)  
Indiana Democratic Congressional Victory Committee

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

Mailing Address 1 Main Street

City State Zip Code  
Evansville IN 47708

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4096.75

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	6

Transaction ID: SA17.54537

Amount of Each Receipt this Period  
515.85

interest

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	515.85
<b>TOTAL</b> This Period (last page this line number only) .....	▶	515.85

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Maria Angelica Aguayo</b>		<b>Transaction ID: SB21B.54347</b>	
Mailing Address 3040 East County Rd 200 North		Date of Disbursement 09 / 15 / 2006	
City North Vernon	State IN	Zip Code 47265	Amount of Each Disbursement this Period 550.00
Purpose of Disbursement field staff		Category/Type	
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:			

Full Name (Last, First, Middle Initial) <b>B. Maria Angelica Aguayo</b>		<b>Transaction ID: SB21B.54372</b>	
Mailing Address 3040 East County Rd 200 North		Date of Disbursement 09 / 30 / 2006	
City North Vernon	State IN	Zip Code 47265	Amount of Each Disbursement this Period 550.00
Purpose of Disbursement field staff		Category/Type	
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:			

Full Name (Last, First, Middle Initial) <b>C. Anthem Blue Cross and Blue Shield</b>		<b>Transaction ID: SB21B.54311</b>	
Mailing Address PO Box 790444		Date of Disbursement 09 / 01 / 2006	
City Saint Louis	State MO	Zip Code 63179	Amount of Each Disbursement this Period 5199.48
Purpose of Disbursement health insurance		Category/Type	
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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6299.48</b>
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Dustin Blythe</b>		<b>Transaction ID:</b> SB21B.54349 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 1732 1/2 Lincoln Way E		Amount of Each Disbursement this Period 750.00
City Mishawaka State IN Zip Code 46544		
Purpose of Disbursement field staff Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Dustin Blythe</b>		<b>Transaction ID:</b> SB21B.54373 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 1732 1/2 Lincoln Way E		Amount of Each Disbursement this Period 750.00
City Mishawaka State IN Zip Code 46544		
Purpose of Disbursement field staff Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Dave Bond</b>		<b>Transaction ID:</b> SB21B.54316 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 329 W Tipton Street		Amount of Each Disbursement this Period 253.18
City Seymour State IN Zip Code 47274		
Purpose of Disbursement travel reimbursement Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1753.18
<b>TOTAL</b> 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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Dave Bond</b>		<b>Transaction ID:</b> SB21B.54360 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 329 W Tipton Street		Amount of Each Disbursement this Period 157.82
City Seymour State IN Zip Code 47274		
Purpose of Disbursement travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Terry Burns</b>		<b>Transaction ID:</b> SB21B.54340 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 9432 Champton Dr		Amount of Each Disbursement this Period 1841.38
City Indianapolis State IN Zip Code 46256		
Purpose of Disbursement marion co. payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mr. Terry Burns</b>		<b>Transaction ID:</b> SB21B.54366 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 9432 Champton Dr		Amount of Each Disbursement this Period 1841.38
City Indianapolis State IN Zip Code 46256		
Purpose of Disbursement marion co. payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3840.58</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Phillippe Carroll</b>		<b>Transaction ID: SB21B.54374</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 6109 Waterside Drive		Amount of Each Disbursement this Period 500.00	
City Fort Wayne	State IN	Zip Code 46814	Category/ Type
Purpose of Disbursement field staff		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr Peter Clerkin</b>		<b>Transaction ID: SB21B.54320</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 209 Threr Rivers East		Amount of Each Disbursement this Period 1375.87	
City Fort Wayne	State IN	Zip Code 46802	Category/ Type
Purpose of Disbursement hayhurst payroll		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr Peter Clerkin</b>		<b>Transaction ID: SB21B.54378</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 209 Threr Rivers East		Amount of Each Disbursement this Period 1375.87	
City Fort Wayne	State IN	Zip Code 46802	Category/ Type
Purpose of Disbursement hayhurst payroll		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3251.74</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Brian Connell</b>		<b>Transaction ID:</b> SB21B.54352 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 1290 Hatfield Drive Apt. 1140		Amount of Each Disbursement this Period 825.00
City Evansville State IN Zip Code 47714	Purpose of Disbursement field staff Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Brian Connell</b>		<b>Transaction ID:</b> SB21B.54375 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 1290 Hatfield Drive Apt. 1140		Amount of Each Disbursement this Period 825.00
City Evansville State IN Zip Code 47714	Purpose of Disbursement field staff Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Andrew S Cullen</b>		<b>Transaction ID:</b> SB21B.54321 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 821 N Main St		Amount of Each Disbursement this Period 995.36
City Bicknell State IN Zip Code 47512	Purpose of Disbursement bayh payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2645.36
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Andrew S Cullen</b>		<b>Transaction ID:</b> SB21B.54379 Date of Disbursement MM / DD / YYYY 09 / 30 / 2006
Mailing Address 821 N Main St		Amount of Each Disbursement this Period 995.36
City Bicknell	State IN Zip Code 47512	
Purpose of Disbursement bayh payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Abigail Curran</b>		<b>Transaction ID:</b> SB21B.54322 Date of Disbursement MM / DD / YYYY 09 / 15 / 2006
Mailing Address 7930 Carleigh Pkwy		Amount of Each Disbursement this Period 1552.08
City Springfield	State VA Zip Code 22152	
Purpose of Disbursement hill payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Abigail Curran</b>		<b>Transaction ID:</b> SB21B.54380 Date of Disbursement MM / DD / YYYY 09 / 30 / 2006
Mailing Address 7930 Carleigh Pkwy		Amount of Each Disbursement this Period 1552.08
City Springfield	State VA Zip Code 22152	
Purpose of Disbursement hill payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4099.52</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Jennifer Grawcock		<b>Transaction ID:</b> SB21B.54572 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 2085 N 150 E		Amount of Each Disbursement this Period 1427.54
City Albion State IN Zip Code 46701	Purpose of Disbursement marion co. payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Jennifer Grawcock		<b>Transaction ID:</b> SB21B.54381 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 5954 Dewey Ave		Amount of Each Disbursement this Period 1427.54
City Indianapolis State IN Zip Code 46219	Purpose of Disbursement marion co. payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Nicolas Grawcock		<b>Transaction ID:</b> SB21B.54330 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 5954 Dewey Ave.		Amount of Each Disbursement this Period 784.80
City Indianapolis State IN Zip Code 46219	Purpose of Disbursement marion co. payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3639.88
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Nicolas Grawcock</b>		<b>Transaction ID:</b> SB21B.54371 Date of Disbursement 09 / 30 / 2006
Mailing Address 5954 Dewey Ave.		Amount of Each Disbursement this Period 784.80
City Indianapolis State IN Zip Code 46219	Purpose of Disbursement marion co. payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. George Guido</b>		<b>Transaction ID:</b> SB21B.54323 Date of Disbursement 09 / 15 / 2006
Mailing Address 4610 Williamsburge Ct		Amount of Each Disbursement this Period 966.22
City Fort Wayne State IN Zip Code 46804	Purpose of Disbursement hayhurst payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. George Guido</b>		<b>Transaction ID:</b> SB21B.54382 Date of Disbursement 09 / 30 / 2006
Mailing Address 4610 Williamsburge Ct		Amount of Each Disbursement this Period 966.22
City Fort Wayne State IN Zip Code 46804	Purpose of Disbursement hayhurst payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2717.24
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Maire Gurevitz</b>		<b>Transaction ID: SB21B.54383</b> Date of Disbursement 09 / 30 / 2006	
Mailing Address 9021 W 1225 north		Amount of Each Disbursement this Period 412.33	
City Demotte State IN Zip Code 46310	Purpose of Disbursement carson payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Jonathan Hall</b>		<b>Transaction ID: SB21B.54318</b> Date of Disbursement 09 / 15 / 2006	
Mailing Address 1046 Monroe Street		Amount of Each Disbursement this Period 623.34	
City Charleston State IN Zip Code 47111	Purpose of Disbursement segregated	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jonathan Hall</b>		<b>Transaction ID: SB21B.54376</b> Date of Disbursement 09 / 30 / 2006	
Mailing Address 1046 Monroe Street		Amount of Each Disbursement this Period 550.00	
City Charleston State IN Zip Code 47111	Purpose of Disbursement field staff	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1585.67
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Jeremy Howser</b>		<b>Transaction ID:</b> SB21B.54324 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 15 / 2006
Mailing Address 1214 Hatfield Drive		Amount of Each Disbursement this Period 2090.92
City Evansville State IN Zip Code 47714	Purpose of Disbursement ellsworth payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Jeremy Howser</b>		<b>Transaction ID:</b> SB21B.54384 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 30 / 2006
Mailing Address 1214 Hatfield Drive		Amount of Each Disbursement this Period 2090.92
City Evansville State IN Zip Code 47714	Purpose of Disbursement ellsworth payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Indiana Department of Revenue</b>		<b>Transaction ID:</b> SB21B.54357 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 15 / 2006
Mailing Address 100 N Senate Ave Rm N103		Amount of Each Disbursement this Period 1428.77
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5610.61</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Indiana Department of Revenue</b>		<b>Transaction ID:</b> SB21B.54397 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 100 N Senate Ave Rm N103		Amount of Each Disbursement this Period 1536.22
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement payroll taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Indiana Dept. of Workforce Development</b>		<b>Transaction ID:</b> SB21B.54356 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 10 N Senate Ave		Amount of Each Disbursement this Period 325.61
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement payroll taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Indiana Dept. of Workforce Development</b>		<b>Transaction ID:</b> SB21B.54398 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 10 N Senate Ave		Amount of Each Disbursement this Period 299.59
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement payroll taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2161.42
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		<b>Transaction ID:</b> SB21B.54354 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address Cincinnati Commerce Center		Amount of Each Disbursement this Period 9908.53
City Cincinnati State OH Zip Code 45999	Purpose of Disbursement payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		<b>Transaction ID:</b> SB21B.54355 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address Cincinnati Commerce Center		Amount of Each Disbursement this Period 177.50
City Cincinnati State OH Zip Code 45999	Purpose of Disbursement payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Internal Revenue Service</b>		<b>Transaction ID:</b> SB21B.54396 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address Cincinnati Commerce Center		Amount of Each Disbursement this Period 10647.67
City Cincinnati State OH Zip Code 45999	Purpose of Disbursement payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	20733.70
<b>TOTAL</b> 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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. David Joseph</b>		<b>Transaction ID: SB21B.54359</b> Date of Disbursement 09 / 22 / 2006	
Mailing Address 5812 Beatle Drive		Amount of Each Disbursement this Period 350.00	
City Indianapolis State IN Zip Code 46216	Purpose of Disbursement travel	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Benjamin Kalish</b>		<b>Transaction ID: SB21B.54325</b> Date of Disbursement 09 / 15 / 2006	
Mailing Address 2019 Coachmans Trail		Amount of Each Disbursement this Period 1172.45	
City South Bend State IN Zip Code 46637	Purpose of Disbursement donnelly payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Benjamin Kalish</b>		<b>Transaction ID: SB21B.54386</b> Date of Disbursement 09 / 30 / 2006	
Mailing Address 2019 Coachmans Trail		Amount of Each Disbursement this Period 1172.45	
City South Bend State IN Zip Code 46637	Purpose of Disbursement donnelly payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2694.90</b>
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Laura Kirtley</b>		<b>Transaction ID:</b> SB21B.54328 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 1001 Corregidor Court		Amount of Each Disbursement this Period 988.66
City Evansville State IN Zip Code 47714	Purpose of Disbursement ellsworth payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Laura Kirtley</b>		<b>Transaction ID:</b> SB21B.54387 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 1001 Corregidor Court		Amount of Each Disbursement this Period 988.66
City Evansville State IN Zip Code 47714	Purpose of Disbursement ellsworth payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Andrew Blair Lattanner</b>		<b>Transaction ID:</b> SB21B.54329 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 51223 Hunting Ridge Tr		Amount of Each Disbursement this Period 991.00
City Granger State IN Zip Code 46530	Purpose of Disbursement donnelly payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2968.32</b>
<b>TOTAL</b> 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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Andrew Blair Lattanner</b>		<b>Transaction ID: SB21B.54388</b> Date of Disbursement 09 / 30 / 2006
Mailing Address 51223 Hunting Ridge Tr		Amount of Each Disbursement this Period 991.00
City Granger State IN Zip Code 46530	Purpose of Disbursement donnelly payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Melissa A Lear</b>		<b>Transaction ID: SB21B.54331</b> Date of Disbursement 09 / 15 / 2006
Mailing Address 627 SE Riverside Dr Apt D		Amount of Each Disbursement this Period 1315.65
City Evansville State IN Zip Code 47713	Purpose of Disbursement carson payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Melissa A Lear</b>		<b>Transaction ID: SB21B.54389</b> Date of Disbursement 09 / 30 / 2006
Mailing Address 627 SE Riverside Dr Apt D		Amount of Each Disbursement this Period 1315.65
City Evansville State IN Zip Code 47713	Purpose of Disbursement carson payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3622.30</b>
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Lord &amp; Abbett</b>		<b>Transaction ID:</b> SB21B.54353 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO Boc 219336		Amount of Each Disbursement this Period 508.33
City Kansas City State MO Zip Code 64121	Purpose of Disbursement 401K 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) <b>B. Lord &amp; Abbett</b>		<b>Transaction ID:</b> SB21B.54399 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO Boc 219336		Amount of Each Disbursement this Period 508.33
City Kansas City State MO Zip Code 64121	Purpose of Disbursement 401K 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) <b>C. Elliott J Magers</b>		<b>Transaction ID:</b> SB21B.54332 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 7370 N 850 East		Amount of Each Disbursement this Period 707.57
City Brownsburg State IN Zip Code 46112	Purpose of Disbursement hill payroll 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1724.23
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Elliott J Magers</b>		<b>Transaction ID:</b> SB21B.54390 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 7370 N 850 East		Amount of Each Disbursement this Period 707.57
City Brownsburg State IN Zip Code 46112		
Purpose of Disbursement hill payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Martin Mooradian</b>		<b>Transaction ID:</b> SB21B.54333 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 122 Chanel Terr. #202		Amount of Each Disbursement this Period 1671.79
City Falls Church State VA Zip Code 22046		
Purpose of Disbursement ellsworth payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Martin Mooradian</b>		<b>Transaction ID:</b> SB21B.54391 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 122 Chanel Terr. #202		Amount of Each Disbursement this Period 1671.79
City Falls Church State VA Zip Code 22046		
Purpose of Disbursement ellsworth payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4051.15
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Kathryn Murphy</b>		<b>Transaction ID:</b> SB21B.54327 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 5477 Village Green Court Apt B		Amount of Each Disbursement this Period 825.00
City State Zip Code Terre Haute IN 47803	Purpose of Disbursement field staff Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Kathryn Murphy</b>		<b>Transaction ID:</b> SB21B.54385 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 5477 Village Green Court Apt B		Amount of Each Disbursement this Period 825.00
City State Zip Code Terre Haute IN 47803	Purpose of Disbursement field staff Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Kathleen Nee</b>		<b>Transaction ID:</b> SB21B.54335 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 18011 Cleveland Road		Amount of Each Disbursement this Period 2047.33
City State Zip Code South Bend IN 46637	Purpose of Disbursement donnelly payroll Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3697.33</b>
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Kathleen Nee</b> Full Name (Last, First, Middle Initial) Mailing Address 18011 Cleveland Road City South Bend State IN Zip Code 46637 Purpose of Disbursement donnelly payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.54393</b> Date of Disbursement 09 / 30 / 2006 Amount of Each Disbursement this Period 2047.33 Category/Type
--	--	---

<b>B. Princeton Mining Company</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 3088 City Terre Haute State IN Zip Code 47803 Purpose of Disbursement utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.54314</b> Date of Disbursement 09 / 11 / 2006 Amount of Each Disbursement this Period 1241.02 Category/Type
---	--	---

<b>C. Joel Riethmiller</b> Full Name (Last, First, Middle Initial) Mailing Address 506 N Indiana Ave City Bloomington State IN Zip Code 47408 Purpose of Disbursement hill payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.54339</b> Date of Disbursement 09 / 15 / 2006 Amount of Each Disbursement this Period 783.85 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4072.20</b>
<b>TOTAL</b> 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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Joel Riethmiller</b>		<b>Transaction ID:</b> SB21B.54365 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 506 N Indiana Ave		Amount of Each Disbursement this Period 783.85
City Bloomington State IN Zip Code 47408	Purpose of Disbursement hill payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Meagan Sims</b>		<b>Transaction ID:</b> SB21B.54342 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 1428 N Co Rd 175 West		Amount of Each Disbursement this Period 779.04
City Greencastle State IN Zip Code 46135	Purpose of Disbursement carson payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Meagan Sims</b>		<b>Transaction ID:</b> SB21B.54367 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 1428 N Co Rd 175 West		Amount of Each Disbursement this Period 779.04
City Greencastle State IN Zip Code 46135	Purpose of Disbursement carson payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2341.93</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Andrew Smith</b>		<b>Transaction ID:</b> SB21B.54334 Date of Disbursement MM / DD / YYYY 09 / 15 / 2006	
Mailing Address 460 E Meade Drive		Amount of Each Disbursement this Period 825.00	
City Evansville	State IN Zip Code 47715		
Purpose of Disbursement field staff Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Andrew Smith</b>		<b>Transaction ID:</b> SB21B.54392 Date of Disbursement MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 460 E Meade Drive		Amount of Each Disbursement this Period 825.00	
City Evansville	State IN Zip Code 47715		
Purpose of Disbursement field staff Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Lauren Smith</b>		<b>Transaction ID:</b> SB21B.54362 Date of Disbursement MM / DD / YYYY 09 / 25 / 2006	
Mailing Address 329 W. Tipton St.		Amount of Each Disbursement this Period 363.78	
City Seymour	State IN Zip Code 47274		
Purpose of Disbursement health insurance reimbursement Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2013.78</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Carrie L Solomon</b>		<b>Transaction ID: SB21B.54343</b> Date of Disbursement MM / DD / YYYY 09 / 15 / 2006
Mailing Address 803 Canterbury Road		Amount of Each Disbursement this Period 943.76
City Evansville State IN Zip Code 47715	Purpose of Disbursement ellsworth payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Carrie L Solomon</b>		<b>Transaction ID: SB21B.54368</b> Date of Disbursement MM / DD / YYYY 09 / 30 / 2006
Mailing Address 803 Canterbury Road		Amount of Each Disbursement this Period 943.76
City Evansville State IN Zip Code 47715	Purpose of Disbursement ellsworth payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Ms. Monica Lee Swintz</b>		<b>Transaction ID: SB21B.54550</b> Date of Disbursement MM / DD / YYYY 09 / 15 / 2006
Mailing Address 3920 Noth Pennsylvania		Amount of Each Disbursement this Period 1270.40
City Indianapolis State IN Zip Code 46205	Purpose of Disbursement bayh payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3157.92</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Ms. Monica Lee Swintz</b>		<b>Transaction ID: SB21B.54369</b> Date of Disbursement MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 3920 Noth Pennsylvania		Amount of Each Disbursement this Period 1270.40	
City Indianapolis State IN Zip Code 46205	Purpose of Disbursement bayh payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Verizon North</b>		<b>Transaction ID: SB21B.54312</b> Date of Disbursement MM / DD / YYYY 09 / 11 / 2006	
Mailing Address PO Box 920041		Amount of Each Disbursement this Period 470.90	
City Dallas State TX Zip Code 75392	Purpose of Disbursement phones	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Leatrice Webb-Parks</b>		<b>Transaction ID: SB21B.54319</b> Date of Disbursement MM / DD / YYYY 09 / 15 / 2006	
Mailing Address 5443 Milroy Rd		Amount of Each Disbursement this Period 906.55	
City Indianapolis State IN Zip Code 46216	Purpose of Disbursement marion co. payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2647.85</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Leatrice Webb-Parks</b>		<b>Transaction ID:</b> SB21B.54377 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 5443 Milroy Rd		Amount of Each Disbursement this Period 906.55
City Indianapolis State IN Zip Code 46216	Purpose of Disbursement marion co. payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Matthew Weisman</b>		<b>Transaction ID:</b> SB21B.54345 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 3114 Green River Drive		Amount of Each Disbursement this Period 1969.74
City Evansville State IN Zip Code 47715	Purpose of Disbursement ellsworth payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Matthew Weisman</b>		<b>Transaction ID:</b> SB21B.54370 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 3114 Green River Drive		Amount of Each Disbursement this Period 1969.74
City Evansville State IN Zip Code 47715	Purpose of Disbursement ellsworth payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4846.03
<b>TOTAL</b> 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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. John Yaggi</b>		<b>Transaction ID: SB21B.54338</b> Date of Disbursement 09 / 15 / 2006	
Mailing Address 2528 Walnut Pike Drive		Amount of Each Disbursement this Period 900.00	
City Bloomington State IN Zip Code 47401	Purpose of Disbursement field staff Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. John Yaggi</b>		<b>Transaction ID: SB21B.54395</b> Date of Disbursement 09 / 30 / 2006	
Mailing Address 2528 Walnut Pike Drive		Amount of Each Disbursement this Period 900.00	
City Bloomington State IN Zip Code 47401	Purpose of Disbursement field staff Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

1800.00

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

97976.32

**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)

<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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial) <b>A. Groundswell Communications, Inc.</b>		<b>Transaction ID:</b> SB30B.54545 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 1629 North Royal St, Ste 350		Amount of Each Disbursement this Period 93600.00
City Alexandria State VA Zip Code 22314	Category/ Type	
Purpose of Disbursement ID Phone Calls 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:		

Full Name (Last, First, Middle Initial) <b>B. Ourso Beycheck Johnson</b>		<b>Transaction ID:</b> SB30B.54578 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 352 Napoleon Street		Amount of Each Disbursement this Period 25000.00
City Baton Rouge State LA Zip Code 70802	Category/ Type	
Purpose of Disbursement Generic mailing 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:		

Full Name (Last, First, Middle Initial) <b>C. Daniel J. Parker</b>		<b>Transaction ID:</b> SB30B.57099 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 7458 Rooses Way		Amount of Each Disbursement this Period 2828.29
City Indianapolis State IN Zip Code 46217	Category/ Type	
Purpose of Disbursement Payroll 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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	121428.29
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 54 / 87

<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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

Full Name (Last, First, Middle Initial)

**A.** Daniel J. Parker

Mailing Address 7458 Roosees Way

City Indianapolis State IN Zip Code 46217

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB30B.57100

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

2828.29

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

2828.29

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

124256.58

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT Indiana Democratic State Central Com	DATE OF RECEIPT M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 48899.88
--	---	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		48899.88
i) Total Administrative .....		Transaction ID: H3.54539
ii) Generic Voter Drive .....		Transaction ID:
iii) Exempt Activities .....		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative) .....	
TOTAL This Period (Generic Voter Drive) .....	
TOTAL This Period (Exempt Activities) .....	
TOTAL This Period (Direct Fundraising) .....	
TOTAL This Period (Direct Candidate Support) .....	
TOTAL This Period (Public Communications Referring Only to Party) .....	
TOTAL This Period (Total Amount Transferred) .....	

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT Indiana Democratic State Central Com	DATE OF RECEIPT M M / D D / Y Y Y Y 09 / 11 / 2006	TOTAL AMOUNT TRANSFERRED 11208.83
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	11208.83	Transaction ID: H3.54540
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT Indiana Democratic State Central Com	DATE OF RECEIPT M M / D D / Y Y Y Y 09 / 15 / 2006	TOTAL AMOUNT TRANSFERRED 6192.14
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	6192.14	Transaction ID: H3.54541
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT Indiana Democratic State Central Com	DATE OF RECEIPT M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 13465.90
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	13465.90	Transaction ID: H3.54542
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT Indiana Democratic State Central Com	DATE OF RECEIPT M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 7612.14
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	7612.14	Transaction ID: H3.54543
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	87378.89
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	87378.89

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Duke Realty Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 75 Remittance Dr Dept 3205			Allocated Activity or Event Year-To-Date 799118.50		
City	State	Zip Code	Category/ Type		
Chicago	IL	60675			
Purpose of Disbursement: rent			Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.54401		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1673.05		6293.87		7966.92

<b>B. Full Name (Last, First, Middle Initial)</b> Anthem Blue Cross and Blue Shield			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 790444			Allocated Activity or Event Year-To-Date 803415.65		
City	State	Zip Code	Category/ Type		
Saint Louis	MO	63179			
Purpose of Disbursement: health insurance			Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.54402		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
902.40		3394.75		4297.15

<b>C. Full Name (Last, First, Middle Initial)</b> National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O Box 856176			Allocated Activity or Event Year-To-Date 804876.23		
City	State	Zip Code	Category/ Type		
LOUISVILLE	KY	40285			
Purpose of Disbursement: credit card payment			Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.54403		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
306.72		1153.86		1460.58

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2882.17		10842.48		13724.65

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Indianapolis Indians			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 501 West Maryland Street			Allocated Activity or Event Year-To-Date [0.00]	
City	State	Zip Code	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> [09 / 01 / 2006]	
Indianapolis	IN	46204		
Purpose of Disbursement: fundraiser			Category/Type [ ]	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.54551	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[173.85]		[654.02]		[827.87]

<b>B. Full Name (Last, First, Middle Initial)</b> US Airways			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Indianapolis Intl Airport			Allocated Activity or Event Year-To-Date [0.00]	
City	State	Zip Code	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> [09 / 01 / 2006]	
Indianapolis	IN	46241		
Purpose of Disbursement: travel			Category/Type [ ]	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.54553	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[83.10]		[312.60]		[395.70]

<b>C. Full Name (Last, First, Middle Initial)</b> McCormick & Schmick			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 110 N Illinois			Allocated Activity or Event Year-To-Date [0.00]	
City	State	Zip Code	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> [09 / 01 / 2006]	
Indianapolis	IN	46204		
Purpose of Disbursement: travel			Category/Type [ ]	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.54554	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[18.88]		[71.04]		[89.92]

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[0.00]		[0.00]		[0.00]

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[ ]	[ ]	[ ]

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O Box 856176			Allocated Activity or Event Year-To-Date 805218.54		
City LOUISVILLE	State KY	Zip Code 40285	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: credit card payment			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.54404		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71.89		270.42		342.31

<b>B. Full Name (Last, First, Middle Initial)</b> Loughmillers Pub & Eatery			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 301 West Washignton Street			Allocated Activity or Event Year-To-Date 0.00		
City Indianapolis	State IN	Zip Code 46204	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: travel/dining			Category/Type		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.54555		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.19		42.09		53.28

<b>C. Full Name (Last, First, Middle Initial)</b> McCormick & Schmick			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 110 N Illinois			Allocated Activity or Event Year-To-Date 0.00		
City Indianapolis	State IN	Zip Code 46204	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: travel/dining			Category/Type		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.54556		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.50		88.39		111.89

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71.89		270.42		342.31

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Crystal Flash			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7935 S Emerson			Allocated Activity or Event Year-To-Date 0.00		
City Indianapolis	State IN	Zip Code 46237	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: travel			Transaction ID: H4.54557		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.75		29.14		36.89

<b>B. Full Name (Last, First, Middle Initial)</b> Hyatt Hotel Dorado Beach			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Highway 693			Allocated Activity or Event Year-To-Date 0.00		
City Dorado	State PR	Zip Code 06460	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: travel/dining			Transaction ID: H4.54558		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.47		9.29		11.76

<b>C. Full Name (Last, First, Middle Initial)</b> Marathon Ashland			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1304 Olin Ave			Allocated Activity or Event Year-To-Date 0.00		
City Indianapolis	State IN	Zip Code 46222	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: travel			Transaction ID: H4.54559		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.00		30.11		38.11

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Shell Oil			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8924 E 116th			Allocated Activity or Event Year-To-Date [ 0.00 ]		
City                      State                      Zip Code Fishers                      IN                      46036	Category/ Type		Date      M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6		
Purpose of Disbursement: travel			Transaction ID: H4.54560		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ 8.21 ]		[ 30.87 ]		[ 39.08 ]

<b>B. Full Name (Last, First, Middle Initial)</b> Don Halls Drive			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1313 W Washington Center Road			Allocated Activity or Event Year-To-Date [ 0.00 ]		
City                      State                      Zip Code Fort Wayne                      IN                      46825	Category/ Type		Date      M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6		
Purpose of Disbursement: travel/dining			Transaction ID: H4.54561		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ 5.31 ]		[ 19.99 ]		[ 25.30 ]

<b>C. Full Name (Last, First, Middle Initial)</b> Hunan Garden			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 207 E National Hwy			Allocated Activity or Event Year-To-Date [ 0.00 ]		
City                      State                      Zip Code Wasington                      IN                      47501	Category/ Type		Date      M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6		
Purpose of Disbursement: travel/dining			Transaction ID: H4.54563		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ 5.46 ]		[ 20.54 ]		[ 26.00 ]

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ 0.00 ]		[ 0.00 ]		[ 0.00 ]

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
[ ]		[ ]		[ ]

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> National City			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O Box 856176			Allocated Activity or Event Year-To-Date 805553.49		
City LOUISVILLE	State KY	Zip Code 40285	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: credit card payment			Transaction ID: H4.54405		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.34		264.61		334.95

<b>B. Full Name (Last, First, Middle Initial)</b> McClure Oil			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1148 S Bloomington Street			Allocated Activity or Event Year-To-Date 0.00		
City Greencastle	State IN	Zip Code 46135	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: travel			Transaction ID: H4.54565		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.86		25.79		32.65

<b>C. Full Name (Last, First, Middle Initial)</b> Circle S # 40			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1860 S Ohio Street			Allocated Activity or Event Year-To-Date 0.00		
City Martinsville	State IN	Zip Code 46151	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: travel			Transaction ID: H4.54566		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.09		19.16		24.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.34		264.61		334.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Thorton's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3801 Keystone Ave			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City	State	Zip Code	Category/ Type	
Indianapolis	IN	46205		
Purpose of Disbursement: travel			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; display: inline-block; padding: 2px;">09 / 01 / 2006</div>	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.54570	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.13		23.04		29.17

<b>B. Full Name (Last, First, Middle Initial)</b> Speedway			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7103 N Meridian			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City	State	Zip Code	Category/ Type	
Indianapolis	IN	46204		
Purpose of Disbursement: travel			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; display: inline-block; padding: 2px;">09 / 01 / 2006</div>	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.54571	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.67		28.83		36.50

<b>C. Full Name (Last, First, Middle Initial)</b> Denison Parking			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 101 W Ohio Street			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">806433.49</div>	
City	State	Zip Code	Category/ Type	
Indianapolis	IN	46204		
Purpose of Disbursement: parking			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; display: inline-block; padding: 2px;">09 / 01 / 2006</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.54406	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
184.80		695.20		880.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
184.80		695.20		880.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Denison Parking			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 36 S Pennsylvania St Ste 200			Allocated Activity or Event Year-To-Date 807753.49		
City Indianapolis	State IN	Zip Code 46204	Date M M / D D / Y Y Y Y 09 / 01 / 2006		
Purpose of Disbursement: parking			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.54407		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.20		1042.80		1320.00

<b>B. Full Name (Last, First, Middle Initial)</b> Simple Distributors LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2000 W Carroll Ave Ste 403			Allocated Activity or Event Year-To-Date 807916.73		
City Chicago	State IL	Zip Code 60612	Date M M / D D / Y Y Y Y 09 / 01 / 2006		
Purpose of Disbursement: supplies			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.54408		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.28		128.96		163.24

<b>C. Full Name (Last, First, Middle Initial)</b> DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 4723			Allocated Activity or Event Year-To-Date 808106.77		
City Houston	State TX	Zip Code 77210	Date M M / D D / Y Y Y Y 09 / 01 / 2006		
Purpose of Disbursement: delivery service			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.54409		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.91		150.13		190.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
351.39		1321.89		1673.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> SBC Internet Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 650396			Allocated Activity or Event Year-To-Date 808703.79		
City Dallas	State TX	Zip Code 75265	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: phones			Transaction ID: H4.54410		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.37		471.65		597.02

<b>B. Full Name (Last, First, Middle Initial)</b> Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 856042			Allocated Activity or Event Year-To-Date 813427.32		
City Louisville	State KY	Zip Code 40285	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: postage meter			Transaction ID: H4.54411		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
991.94		3731.59		4723.53

<b>C. Full Name (Last, First, Middle Initial)</b> Cingular Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10617 Washington St			Allocated Activity or Event Year-To-Date 813520.93		
City Indianapolis	State IN	Zip Code 42669	Date MM / DD / YYYY 09 / 01 / 2006		
Purpose of Disbursement: phones			Transaction ID: H4.54412		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.66		73.95		93.61

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1136.97		4277.19		5414.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Anthem Life Insurance Company of Indiana			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address Department L-8111			Allocated Activity or Event Year-To-Date 814104.63																						
City Columbus	State OH	Zip Code 43268	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	0	1	/	2	0	0	6																
Purpose of Disbursement: life insurance			Transaction ID: H4.54413																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.58		461.12		583.70

<b>B. Full Name (Last, First, Middle Initial)</b> DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 4723			Allocated Activity or Event Year-To-Date 814271.72																						
City Houston	State TX	Zip Code 77210	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	0	1	/	2	0	0	6																
Purpose of Disbursement: delivery service			Transaction ID: H4.54414																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.09		132.00		167.09

<b>C. Full Name (Last, First, Middle Initial)</b> AT&T Capital Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 13160 Collections Center Drive			Allocated Activity or Event Year-To-Date 814813.43																						
City Chicago	State IL	Zip Code 60693	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	0	1	/	2	0	0	6																
Purpose of Disbursement: phones			Transaction ID: H4.54415																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.76		427.95		541.71

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
271.43		1021.07		1292.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Simple Distributors LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2000 W Carroll Ave Ste 403			Allocated Activity or Event Year-To-Date 815301.03		
City Chicago	State IL	Zip Code 60612	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: supplies			Transaction ID: H4.54416		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.40		385.20		487.60

<b>B. Full Name (Last, First, Middle Initial)</b> Simple Distributors LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2000 W Carroll Ave Ste 403			Allocated Activity or Event Year-To-Date 815582.63		
City Chicago	State IL	Zip Code 60612	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: supplies			Transaction ID: H4.54417		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.14		222.46		281.60

<b>C. Full Name (Last, First, Middle Initial)</b> The Conference Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 254 Chapman Rd , Topkis Building S			Allocated Activity or Event Year-To-Date 815920.76		
City Newark	State DE	Zip Code 19702	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: phones			Transaction ID: H4.54418		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71.01		267.12		338.13

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
232.55		874.78		1107.33

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> SBC Long Distance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 660688			Allocated Activity or Event Year-To-Date 817300.18																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H4.54419			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	1	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	0	1	/	2	0	0	6																
Dallas	TX	75266																							
Purpose of Disbursement: long distance			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
289.68		1089.74		1379.42

<b>B. Full Name (Last, First, Middle Initial)</b> Orso Beycheck Johnson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 352 Napoleon Street			Allocated Activity or Event Year-To-Date 853050.18																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H4.54575			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	1	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	0	1	/	2	0	0	6																
Baton Rouge	LA	70802																							
Purpose of Disbursement: direct mail			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7507.50		28242.50		35750.00

<b>C. Full Name (Last, First, Middle Initial)</b> Peter D. Hart Research Associates, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1724 Connecticut Ave, NW			Allocated Activity or Event Year-To-Date 861450.18																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H4.54420			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	1	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	1	1	/	2	0	0	6																
Washington	DC	20009																							
Purpose of Disbursement: survey			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1764.00		6636.00		8400.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9561.18		35968.24		45529.42

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Mr. Mark A. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1244 N Illinois #111			Allocated Activity or Event Year-To-Date 861521.28		
City Indianapolis	State IN	Zip Code 46202	Date M M / D D / Y Y Y Y 09 / 11 / 2006		
Purpose of Disbursement: travel			Transaction ID: H4.54421		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.93		56.17		71.10

<b>B. Full Name (Last, First, Middle Initial)</b> Accident Fund			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 77000 Dept 77125			Allocated Activity or Event Year-To-Date 861766.28		
City Detroit	State MI	Zip Code 48277	Date M M / D D / Y Y Y Y 09 / 11 / 2006		
Purpose of Disbursement: Liability insurance			Transaction ID: H4.54422		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.45		193.55		245.00

<b>C. Full Name (Last, First, Middle Initial)</b> Gregory & Appel Insurance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1402 N. Capitol, Suite 400			Allocated Activity or Event Year-To-Date 861822.28		
City Indianapolis	State IN	Zip Code 46202	Date M M / D D / Y Y Y Y 09 / 11 / 2006		
Purpose of Disbursement: Liability insurance			Transaction ID: H4.54423		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.76		44.24		56.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.14		293.96		372.10

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Simple Distributors LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2000 W Carroll Ave Ste 403			Allocated Activity or Event Year-To-Date 861985.52																						
City	State	Zip Code	Category/ Type																						
Chicago	IL	60612																							
Purpose of Disbursement: office supplies			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	1	1	/	2	0	0	6																
Activity or Event Identifier: Administrative			Transaction ID: H4.54424																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.28		128.96		163.24

<b>B. Full Name (Last, First, Middle Initial)</b> Time Warner Cable			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 741855			Allocated Activity or Event Year-To-Date 862084.87																						
City	State	Zip Code	Category/ Type																						
Cincinnati	OH	45274																							
Purpose of Disbursement: cable			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	1	1	/	2	0	0	6																
Activity or Event Identifier: Administrative			Transaction ID: H4.54425																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.86		78.49		99.35

<b>C. Full Name (Last, First, Middle Initial)</b> DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 4723			Allocated Activity or Event Year-To-Date 862238.56																						
City	State	Zip Code	Category/ Type																						
Houston	TX	77210																							
Purpose of Disbursement: delivery service			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	1	1	/	2	0	0	6																
Activity or Event Identifier: Administrative			Transaction ID: H4.54426																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.27		121.42		153.69

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
87.41		328.87		416.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

**A. Full Name (Last, First, Middle Initial)**  
Peter D. Hart Research Associates, Inc.

Mailing Address  
1724 Connecticut Ave, NW

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement:  
survey

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
867238.56

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	1	/	2	0	0	6

  
**Transaction ID:** H4.54427

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

**B. Full Name (Last, First, Middle Initial)**  
Mrs. Kimberly Bostic

Mailing Address  
6864 W Philadelphia Dr

City	State	Zip Code
McCordsville	IN	46055

Purpose of Disbursement:  
payroll

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
868559.78

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

  
**Transaction ID:** H4.54428

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.46		1043.76		1321.22

**C. Full Name (Last, First, Middle Initial)**  
Ms. Jennifer D. Hill

Mailing Address  
1128 E 56th St

City	State	Zip Code
Indianapolis	IN	46220

Purpose of Disbursement:  
payroll

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
870278.28

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

  
**Transaction ID:** H4.54429

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.88		1357.62		1718.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1688.34		6351.38		8039.72

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Mr. Mark A. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1244 N Illinois #111			Allocated Activity or Event Year-To-Date 871284.16	
City Indianapolis	State IN	Zip Code 46202	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: payroll			Transaction ID: H4.54430	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.23		794.65		1005.88

<b>B. Full Name (Last, First, Middle Initial)</b> Ms. Kelly N. Norton			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6136 Winthrop Ave			Allocated Activity or Event Year-To-Date 872076.97	
City Indianapolis	State IN	Zip Code 46220	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: payroll			Transaction ID: H4.54431	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.49		626.32		792.81

<b>C. Full Name (Last, First, Middle Initial)</b> Mr. Michael D. Edmondson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1530 E 81st St			Allocated Activity or Event Year-To-Date 875076.71	
City Indianapolis	State IN	Zip Code 46240	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>	
Purpose of Disbursement: payroll			Transaction ID: H4.54432	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
629.95		2369.79		2999.74

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1007.67		3790.76		4798.43

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Voter Activation Network LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 54 Regent St			Allocated Activity or Event Year-To-Date 879076.71		
City Cambridge	State MA	Zip Code 02140	Date MM / DD / YYYY 09 / 25 / 2006		
Purpose of Disbursement: voter file maintenance			Transaction ID: H4.54433		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
840.00		3160.00		4000.00

<b>B. Full Name (Last, First, Middle Initial)</b> AT & T			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 660011			Allocated Activity or Event Year-To-Date 880098.21		
City Dallas	State TX	Zip Code 75266	Date MM / DD / YYYY 09 / 25 / 2006		
Purpose of Disbursement: phones			Transaction ID: H4.54434		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
214.52		806.98		1021.50

<b>C. Full Name (Last, First, Middle Initial)</b> Dell Financial Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 5292			Allocated Activity or Event Year-To-Date 880220.52		
City Carol Stream	State IL	Zip Code 60197	Date MM / DD / YYYY 09 / 25 / 2006		
Purpose of Disbursement: computer			Transaction ID: H4.54435		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.69		96.62		122.31

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1080.21		4063.60		5143.81

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 2314			Allocated Activity or Event Year-To-Date 880745.52		
City Carol Stream	State IL	Zip Code 60132	Date MM / DD / YYYY 09 / 25 / 2006		
Purpose of Disbursement: legal press			Transaction ID: H4.54436		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.25		414.75		525.00

<b>B. Full Name (Last, First, Middle Initial)</b> Jewett Printing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 West Ohio St Ste 2000			Allocated Activity or Event Year-To-Date 882545.52		
City Indianapolis	State IN	Zip Code 46204	Date MM / DD / YYYY 09 / 25 / 2006		
Purpose of Disbursement: printing			Transaction ID: H4.54437		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
378.00		1422.00		1800.00

<b>C. Full Name (Last, First, Middle Initial)</b> Skyline Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 American Sq Fl 36			Allocated Activity or Event Year-To-Date 882689.26		
City Indianapolis	State IN	Zip Code 46282	Date MM / DD / YYYY 09 / 25 / 2006		
Purpose of Disbursement: dues			Transaction ID: H4.54438		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.19		113.55		143.74

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
518.44		1950.30		2468.74

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Strategic Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6495 English Ivy Court			Allocated Activity or Event Year-To-Date 886847.26		
City Springfield	State VA	Zip Code 22152	Date M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6		
Purpose of Disbursement: Polling			Transaction ID: H4.54439		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
873.18		3284.82		4158.00

<b>B. Full Name (Last, First, Middle Initial)</b> Coca-Cola Indiana			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 135 S La Salle St Dept 2329			Allocated Activity or Event Year-To-Date 886985.27		
City Chicago	State IL	Zip Code 60674	Date M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6		
Purpose of Disbursement: office supplies			Transaction ID: H4.54440		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.98		109.03		138.01

<b>C. Full Name (Last, First, Middle Initial)</b> Xpedx Store Division			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 18453			Allocated Activity or Event Year-To-Date 887039.71		
City Chicago	State IL	Zip Code 60618	Date M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6		
Purpose of Disbursement: office supplies			Transaction ID: H4.54441		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.43		43.01		54.44

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
913.59		3436.86		4350.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> IKON Office Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 802558			Allocated Activity or Event Year-To-Date 889532.16		
City Chicago	State IL	Zip Code 60680	Date <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: office equipment			Transaction ID: H4.54442		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
523.41		1969.04		2492.45

<b>B. Full Name (Last, First, Middle Initial)</b> Mr. Mark A. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1244 N Illinois #111			Allocated Activity or Event Year-To-Date 889561.65		
City Indianapolis	State IN	Zip Code 46202	Date <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: travel			Transaction ID: H4.54443		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.19		23.30		29.49

<b>C. Full Name (Last, First, Middle Initial)</b> Bucher & Christian Consulting, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 22 E Washington St ste 700			Allocated Activity or Event Year-To-Date 891351.65		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: computer			Transaction ID: H4.54444		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
375.90		1414.10		1790.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
905.50		3406.44		4311.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Sandler & Reiff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 E St SE Ste 300			Allocated Activity or Event Year-To-Date 892151.65		
City Washington	State DC	Zip Code 20003	Date MM / DD / YYYY 09 / 25 / 2006		
Purpose of Disbursement: retainer			Transaction ID: H4.54445		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
168.00		632.00		800.00

<b>B. Full Name (Last, First, Middle Initial)</b> Anthem Blue Cross and Blue Shield			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address L-2099			Allocated Activity or Event Year-To-Date 892201.65		
City Columbus	State OH	Zip Code 43260	Date MM / DD / YYYY 09 / 26 / 2006		
Purpose of Disbursement: health insurance			Transaction ID: H4.54446		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.50		39.50		50.00

<b>C. Full Name (Last, First, Middle Initial)</b> Mrs. Kimberly Bostic			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6864 W Philadelphia Dr			Allocated Activity or Event Year-To-Date 893522.87		
City McCordsville	State IN	Zip Code 46055	Date MM / DD / YYYY 09 / 30 / 2006		
Purpose of Disbursement: payroll			Transaction ID: H4.54447		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.46		1043.76		1321.22

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
455.96		1715.26		2171.22

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Mr. Michael D. Edmondson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1530 E 81st St			Allocated Activity or Event Year-To-Date 896119.11																						
City	State	Zip Code	Category/ Type																						
Indianapolis	IN	46240																							
Purpose of Disbursement: payroll			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	3	0	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	3	0	/	2	0	0	6																
Activity or Event Identifier: Administrative			Transaction ID: H4.54448																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
545.21		2051.03		2596.24

<b>B. Full Name (Last, First, Middle Initial)</b> Ms. Jennifer D. Hill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1128 E 56th St			Allocated Activity or Event Year-To-Date 897837.61																						
City	State	Zip Code	Category/ Type																						
Indianapolis	IN	46220																							
Purpose of Disbursement: payroll			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	3	0	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	3	0	/	2	0	0	6																
Activity or Event Identifier: Administrative			Transaction ID: H4.54449																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.88		1357.62		1718.50

<b>C. Full Name (Last, First, Middle Initial)</b> Mr. Mark A. Lee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1244 N Illinois #111			Allocated Activity or Event Year-To-Date 898843.49																						
City	State	Zip Code	Category/ Type																						
Indianapolis	IN	46202																							
Purpose of Disbursement: payroll			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	3	0	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	3	0	/	2	0	0	6																
Activity or Event Identifier: Administrative			Transaction ID: H4.54450																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.23		794.65		1005.88

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1117.32		4203.30		5320.62

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

**A. Full Name (Last, First, Middle Initial)**  
Ms. Kelly N. Norton

Mailing Address  
6136 Winthrop Ave

City	State	Zip Code
Indianapolis	IN	46220

Purpose of Disbursement:  
payroll

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
899636.30

Date  /  /   
**Transaction ID:** H4.54451

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.49		626.32		792.81

**B. Full Name (Last, First, Middle Initial)**  
Cingular Wireless

Mailing Address  
10617 Washington St

City	State	Zip Code
Indianapolis	IN	42669

Purpose of Disbursement:  
phones

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
901757.77

Date  /  /   
**Transaction ID:** H4.54452

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
445.51		1675.96		2121.47

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
612.00		2302.28		2914.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
23227.30		87378.89		110606.19

Form/Schedule: **F3XA**

Transaction ID:

This submission responds to the Commission's letter of February 16th. 1) The contribution was for \$5,000. The report has been amended. 2) The report has been amended to include federal payroll on Line 30b. 3) Payments to Groundswell communication were for voter id activity and payment to Ourso Beycheck was for a generic absentee ballot mailing. Neither expenditure is allocable to any federal candidate. 4) Payments for life and health insurance and payroll on Line 21a were for employees who did not work more than 25% of their time in connection with federal elections 5) The expenditure on H4 noted as direct mail was actually a poll and was not shared or allocable to any federal candidate 6) Expenditures for survey and voter file maintenance are not for activities that meet the definition of federal election activity.

Form/Schedule: **SA11A1** Dollars For Democrats

Transaction ID: **SA11A1.54492**

**Image# 27930231592**

Form/Schedule: **SA11A1** Dollars For Democrats

Transaction ID: **SA11A1.54494**

Form/Schedule: **SA11A1** Dollars For Democrats

Transaction ID: **SA11A1.54495**

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**Image# 27930231593**

Form/Schedule: **SA11A1** Dollars For Democrats

Transaction ID: **SA11A1.54497**

Form/Schedule: **SA11A1** Dollars For Democrats

Transaction ID: **SA11A1.54499**

\*\*\*\*\*

**Image# 27930231594**

Form/Schedule: **SA11A1** Dollars For Democrats

Transaction ID: **SA11A1.54501**

Form/Schedule: **SA11A1** Dollars For Democrats

Transaction ID: **SA11A1.54502**

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