



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
STAR Financial Bank PAC

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		14,532.52
(b) Cash on Hand at Beginning of Reporting Period.....	7,180.52	
(c) Total Receipts (from Line 19) .....	1,890.00	3,610.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	9,070.52	18,142.52
7. Total Disbursements (from Line 31) .....	5,500.00	14,572.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3,570.52	3,570.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....		

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name  
**STAR Financial Bank PAC**

Report Covering the Period: From: MEM 04 / DED 01 / YEAR 2014 To: MEM 06 / DED 30 / YEAR 2014

**I. Receipts**

**COLUMN A**  
Total This Period

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

11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	505.00	505.00
(ii) Unitemized.....	1,385.00	3,105.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	1,890.00	3,610.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	1,890.00	3,610.00
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1,890.00	3,610.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1,890.00	3,610.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5,500.00	14,572.00
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5,500.00	14,572.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5,500.00	14,572.00

**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) .....	1,890.00	3,610.00
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1,890.00	3,610.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
37. Offsets to Operating Expenditures (from Line 15, page 3).....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

COLUMN B

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1 OF 2
	<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	

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)  
**STAR Financial Bank PAC**

Full Name (Last, First, Middle Initial) <b>A. Marcuccilli, Thomas M.</b>		Date of Receipt <b>06 / 30 / 2014</b>
Mailing Address <b>10618 Indian Ridge Drive</b>		Amount of Each Receipt this Period <b>120.00</b>
City <b>Fort Wayne, IN 46814</b>	State      Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>STAR Financial Group</b>	Occupation <b>Banker</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>260.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Marcuccilli, James, C.</b>		Date of Receipt <b>06 / 30 / 2014</b>
Mailing Address <b>534 Chestnut Forest Cove</b>		Amount of Each Receipt this Period <b>140.00</b>
City <b>Fort Wayne, IN 46814</b>	State      Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>STAR Financial Bank</b>	Occupation <b>Banker</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>280.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Wingrove, William R.</b>		Date of Receipt <b>06 / 30 / 2014</b>
Mailing Address <b>7111 Koldyke Drive</b>		Amount of Each Receipt this Period <b>140.00</b>
City <b>Fishers, IN 46038</b>	State      Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>STAR Financial Bank</b>	Occupation <b>Banker</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>280.00</b>	

SUBTOTAL of Receipts This Page (optional).....	<b>400.00</b>
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 2 OF 2

(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**STAR Financial Bank PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Stinson, Paula S.**

Date of Receipt  
06 / 30 / 2014

Mailing Address  
119EMS B20C

City: Pierceton, IN 46562

FEC ID number of contributing federal political committee: C

Name of Employer: STAR Financial Bank  
Occupation: Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Amount of Each Receipt this Period  
105.00

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

Date of Receipt

Mailing Address

City: State Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Amount of Each Receipt this Period

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

Date of Receipt

Mailing Address

City: State Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 105.00

**TOTAL** This Period (last page this line number only) ..... ▶ 505.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 4

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

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NAME OF COMMITTEE (In Full)  
**STAR Financial Bank PAC**

Full Name (Last, First, Middle Initial) <b>A. Northeast Indiana Political Action Committee</b>		Date of Disbursement 05 / 05 / 2014
Mailing Address 4656 W. Jefferson Blvd.		Amount of Each Disbursement this Period <b>2,000.00</b>
City Fort Wayne, IN 46804	State Zip Code	
Purpose of Disbursement	Category/Type <b>011</b>	
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. The Committee to Elect Darlene Likens</b>		Date of Disbursement 05 / 08 / 2014
Mailing Address 16 E. Ninth Street, #213		Amount of Each Disbursement this Period <b>200.00</b>
City Anderson, IN 46016	State Zip Code	
Purpose of Disbursement	Category/Type <b>011</b>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President County Clerk	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District:		

Full Name (Last, First, Middle Initial) <b>C. The Committee to Elect Kelly Gaskill</b>		Date of Disbursement 05 / 08 / 2014
Mailing Address 16 E. 9th Street		Amount of Each Disbursement this Period <b>200.00</b>
City Anderson, IN 46016	State Zip Code	
Purpose of Disbursement	Category/Type <b>011</b>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President County Treasurer	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District:		

SUBTOTAL of Disbursements This Page (optional).....▶	<b>2,400.00</b>
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
STAR Financial Bank PAC

Full Name (Last, First, Middle Initial)

A. Phil GiaQuinta for State Representative

Date of Disbursement

05 / 12 / 2014

Mailing Address  
4311 Old Mill Road

City State Zip Code  
Fort Wayne, IN 46807

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:  House  Senate  President  
State Rep. State: IN District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Tera Klutz for Auditor

Date of Disbursement

05 / 14 / 2014

Mailing Address  
309 Eagle Point Court

City State Zip Code  
Fort Wayne, IN 46845

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Amount of Each Disbursement this Period

200.00

Office Sought:  House  Senate  President  
County Auditor State: IN District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Casey Cox for State Representative

Date of Disbursement

05 / 14 / 2014

Mailing Address  
110 W. Berry Street, Suite 1100

City State Zip Code  
Fort Wayne, IN 46802

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Amount of Each Disbursement this Period

400.00

Office Sought:  House  Senate  President  
State Rep. State: IN District:

Disbursement For:  Primary  General  Other (specify) ▼

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

1,600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
STAR Financial Bank PAC

Full Name (Last, First, Middle Initial)

A. Anita Mather for County Recorder

Date of Disbursement

05 / 14 / 2014

Mailing Address  
6106 Westhampton Drive

City Fort Wayne, IN 46825 State Zip Code

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

100.00

Office Sought: County Recorder State: IN  
 House  
 Senate  
 President  
 District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Lisabeth Borgmann for Allen County Clerk

Date of Disbursement

05 / 14 / 2014

Mailing Address  
3309 Oak Glen Trail

City Fort Wayne, IN 46804 State Zip Code

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

200.00

Office Sought: County Clerk State: IN  
 House  
 Senate  
 President  
 District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Friends of Jim Banks

Date of Disbursement

06 / 04 / 2014

Mailing Address  
238 S. Eagle Glen Trail

City Columbia City, IN 46725 State Zip Code

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

200.00

Office Sought: State Senate State: IN  
 House  
 Senate  
 President  
 District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
STAR Financial Bank PAC

Full Name (Last, First, Middle Initial)

**A. Indiana Business for Responsive Government**

Date of Disbursement

MM	DD	YYYY
06	30	2014

Mailing Address  
115 W. Washington Street, Suite 850S

City State Zip Code  
Indianapolis, IN 46204

Purpose of Disbursement

011
Category/ Type

Amount of Each Disbursement this Period

1,000.00
----------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

MM	DD	YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

MM	DD	YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1,000.00
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TOTAL This Period (last page this line number only).....▶

5,500.00
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7005 1160 0004 6196 4176

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**\$1.40**  
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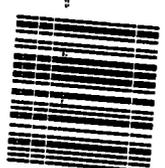


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**Federal Election Commission**  
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