1403-127-0558

FEC FORM 3X

Office

Use

Only

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2014 JUL 18 PM 12: 37

FEC FORM 3X

Rev. 12/2004

			<u>_</u>	Office Use (
1. NAME OF COMMITTEE (in f	TYPE OR PRINT ▼	Example: If typover the lines.	oing, type 12F	E4M5	
CASS CO	UNTY REPUB	CIGAN CEN	TRAL CO	MM TTE	6
				1.1.1.1	
ADDRESS (number and	street) PO BOX	791			
Check if diffe than previous reported. (AC	sly U = A A C	P.O.R.T	II.	J 4694	7
2. FEC IDENTIFICA	ATION NUMBER ▼	CITY A	STATE	ΣΙΙ	P CODE A
C00.02	0.4.53	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	
4. TYPE OF REP (Choose One)	Report Due On:	Feb 20 (M2) Mar 20 (M3)	May 20 (M5) Jun 20 (M6)	Aug 20 (M8) Sep 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
.,,		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
April 15 Quarterly	Report (Q1) (c) 12-Day	Primary (1)	2P) (General (12G)	Runoff (12R)
July 15 Quarterly	Report (Q2)	ection	general General	ę	mall '
October Quarterly	15 Report (Q3)	for the: Convention	T (12C)	Special (12S)	
January		Election on		ž.	n the state of
July 31 I Report (I Year Onl	Non-election (a) 30-Day	(Land)	0G)	Runoff (30R)	Special (30S)
Terminat (TER)	ion Report	Election on	1000/177	li .	n the State of
5. Covering Period	04'01'	014 through	06	30 201	4
I certify that I have ex	camined this Report and to the		d belief it is true, co	prrect and complete	
Type or Print Name of	f Treasurer DAVID	RICHEY			
Signature of Treasure			Date	0.7	2014

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

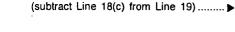
SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS Page 2 FEC Form 3X (Rev. 02/2003) Write or Type Committee Name CENTRA DM MITTEE Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at 50,023.66 Beginning of Reporting Period...... 4,6,8,1,00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... 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

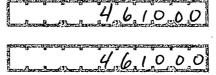
Toll Free 800-424-9530 Local 202-694-1100

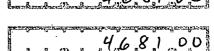
DETAILED SUMMARY PAGE

of Receipts FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name Republican ASS DUM ITTEE 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts Calendar Year-to-Date **Total This Period** 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... 4,6.8.1.00 4,6,10,0 (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)......▶ (b) Political Party Committees Other Political Committees (such as PACs)..... Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).......



20. Total Federal Receipts





DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period	COLOWN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tills Fellou	Caleffort free for the state of
	(i) Federal Share		The state of the s
	(ii) Non-Federal Share		
	(b) Other Federal Operating		
	Expenditures	477046	8.591.77
	(c) Total Operating Expenditures	Company of the state of the sta	
	(add 21(a)(i), (a)(ii), and (b))▶	477046	859177
22.	Transfers to Affiliated/Other Party	The state of the s	
23.	Committees	and the state of t	construction of tracely make and the months of the second
24	and Other Political Committees		particular of the state of the
4 .	Independent Expenditures (use Schedule E)		
25.	(2 U.S.C. §441a(d)) (use Schedule F)	Complete of the colored Comple	and the state of t
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
26.	Loan Repayments Made		
		hand a second and a second and and	
27	Loans Made	7	
28.	Refunds of Contributions To: (a) Individuals/Persons Other	Action of the second se	
	Than Political Committees		
	•		
	(b) Political Party Committees	3 20 23 1 20 20 20 20 20 20 20 20 20 20 20 20 20	hardend of the short that a short that
	(c) Other Political Committees	and the second s	The state of the s
	(such as PACs)	And the second s	
	(d) Total Contribution Refunds	,	
	(add Lines 28(a), (b), and (c))▶	and a character of the first of the second and the	
	(add Lines 20(a), (b), and (c),		
29	Other Disbursements	the state of the s	
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share		Lander Charles Amillanda de Charles
	(ii) "Levin" Share	A 12 hard and the standard beautiful and the sta	12 - 12 - 12 - 13 - 12 - 13 - 12 - 13 - 12 - 13 - 12 - 13 - 12 - 13 - 12 - 13 - 12 - 13 - 12 - 13 - 12 - 13 - 13
	(b) Federal Election Activity Paid Entirely	handandendandandandandundundund	and the second and th
	With Federal Funds		
	(c) Total Federal Election Activity (add	Sometime of many and many to make a second second	de andre and andre and andre and andre and andre a
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	logge for the filter of the section	
24	Total Dishurasments (-dd Lines 04/2) 00		
31.	Total Disbursements (add Lines 21(c), 22,		handing formal was been through a farmed and the section of
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4,770.46	8,591.77
32	Total Federal Disbursements		······
-2.	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	477046	859177
			Sandard milloritarille disentendential
	•		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

111	Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	4.610.00	4168100
34.	Total Contribution Refunds (from Line 28(d))	P -	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	4,6,10,00	4,610.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	4,770,46	8,591,77
37.	Offsets to Operating Expenditures (from Line 15, page 3)		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	4,770 46	859177

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COUEDINE D. (FEO Form OV)			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only of 21b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the name	ments may not be sold or use ne and address of any politica	ed by any perso al committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CASS Go Republican	o Central	Comm	UTTEE
A. POST MASTER			Date of Disbursement
Mailing Address 466 9th St	7-0-1-		0.11 0.41 (0.1.71
LOSANSPORT IN Purpose of Disbursement	State Zip Code 46947		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	ment For: Primary ☐ General Other (specify) ▼		
B. Cass Co 4-H Association Mailing Address			Date of Disbursement
	30 L State Zip Code TN 46 947	DO 3	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	Type	2,25,0,0
Full Name (Last, First, Middle Initial) C. Destrey Rottey Mailing Address	Dn.		Date of Disbursement
City Lega No foet J. Purpose of Disbursement	State Zip Code		
REINDUMENT FOR MC Candidate Name	d	Category/ Type	Amount of Each Disbursement this Period
Senate President	ment For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional).			28161

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

SCHEDULE B (FEC Form 3X)

SOURDOLL D (1 LO 1 GIIII GA)	Use separate schedule(s) for each category of the	FOR LINE NUMBER:		PAGE	ملات	- 7
TEMIZED DISBURSEMENTS		(check only 21b		23	25 ເ	26
	Detailed Summary Page	27		28b 28c	29	30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)	o and address of any political		Sonor Commodi	aona nom auch	331111111111	-
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/ Cass Co Kepublica.	J Central	COMMIT	TEE			
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<u>-</u> - 1	Primary General					
<u></u>	Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) B	1)		Date of Disb	oursement		
CASS CO REpubliCAN HOLDING CORP						
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	State Zip Code					
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Purpose of Disbursement			A	ach Dishams	ant this P	orio d
APR - JUNE RENT Candidate Name				Amount of Each Disbursement this Period		
		Category/ Type		1,5	00	0,0
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State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
C. INDIANA ROUBLICAN	Party		Date of Dist	oursement		0.30
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47 S MERDIAW ST	2ND Floor	•	ACCUMENTATION	manistra amberi		
INDIANAPOLIS I	State Zip Code W 46704					
Purpose of Disbursement	_ 5	у п <u>у</u>				
	-EE	003	ł ·	Each Disbursem		
Candidate Name		Category/ Type		9	60	- 4
Office Sought: House Disburser	ment For:	· ype		Danillander 17	Comments?	
Senate	Primary General					
State: District:	Other (specify)					
				2 6	- ^ //	0'0
SUBTOTAL of Disbursements This Page (optional)		<u> </u>		ري م	$\mathcal{O}_{\mathcal{F}_{i}}$	7.3
TOTAL This Period (last page this line number only)		······		Andreiter (Dr.	<u></u>	- Maria

SCHEDULE B (FEC Form

SCHEDOLL B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE I	_	PAGE 3 CF 4
TEMIZED DISBURSEMENTS	for each category of the			24
	Detailed Summary Page	27		28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam	nents may not be sold or usine and address of any politic	ed by any perso	on for the purpose of solicit contributions from	citing contributions such committee.
NAME OF COMMITTEE (In Full)				· · · · · · · · · · · · · · · · · · ·
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Full Name (Last, First, Middle Initial)	a willow	COMM	7/166	
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ComCAST			Ban Loson	Y TO TO TO
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City	State Zip Code			
LOGANSOORT IN				
Purpose of Disbursement			Amount of Each Disk.	recoment this Desired
Phone Candidate Name		00/	Amount of Each Disbu	
		Category/ Type		44.95
Office Sought: House Disbursen		**	***************************************	
	Primary General			
State: District:	Other (specify) ▼			·
Full Name (Last, First, Middle Initial)				
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65TAGE Candidate Name		00.1	Amount of Each Disbu	arsement this refloo
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	Primary General			
State: District:	Other (specify) ₩			
Full Name (Last, First, Middle Initial)				
			Date of Disbursement	
MIDDAM CORROLL			MANA / LOADS /	LANGE OF THE PARTY
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	State Zip Code	-		
Monticello IN	47960			
Purpose of Disbursement				
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Senate	Primary General	!		
President	Other (specify) ▼			
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SUBTOTAL of Disbursements This Page (optional)		>		1,0,1,8,9,5
TOTAL This Period (last page this line number only)	1	·····		

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SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only 21b	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) CASS COUNTY Republic	AN CENTRAL	Con	Mm I TE
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address	Welding		10/1/26 2014
1110 N 6th St			10.01 1281 1201 71
Monticello I	tate Zip Code N 47960		•
Purpose of Disbursement Helium TANKS Balloons		003	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	97000
President	nent For: Primary General Other (specify) ▼	- 75-	Service authorities (par a pundinarial N. affair actions of relation at 15.2000)
State: District: Full Name (Last, First, Middle Initial)			
В. 🖊		ŀ	Date of Disbursement
Com (AST Mailing Address			06 28 2014
800 WATER ST	State Zip Code		hoodingshandered beauthout beauthout
COSANSPORT IN	46947		·
Purpose of Disbursement	-	00	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	445
	nent For: Primary ☐ General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
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City	State Zip Code		
Purpose of Disbursement		The state of the s	
Candidate Name		Category/	Amount of Each Disbursement this Period
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Senate President State: District:	Primary ☐ General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		·····	To the short have been something the state of the state o
TOTAL This Period (last page this line number only)			per other properties of the section

1403-127-056

20463 UNITED STATES POSTAL SERVICE 1000

U.S. POSTAGE LOGANSPORT.IN JUL 14:14 AMOUNT

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Received from Electronic Filing Office	Date of Receipt			
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(8/2013)	DATE PREPARED			