Image# 14952616572 PAGE 1 / 13

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

(a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Quarterly Report (Q2) Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) General (30G) Report Non-election Report In the Election on General (30G) Report (30R) Report (30R) Report (30R) Report (30R) Report (50R) R	1 OTTIVI OX	For Other Than An A	Authorized Committee		Office Use Only
ADDRESS (number and street) Check if different than previously reported. (ACC) Check if different than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER C C00249896 3. IS THIS REPORT (N) OR AMENDED (A) 4. TYPE OF REPORT (Choose One) (a) Cuarterly Reports: (b) Monthly Report (Choose One) (a) Cuarterly Report (OI) July 15 Quarterly Report (OI) July 31 Mich-Year Report (Non-election Near Only) (MY) Election on Title (OI) Termination Report (TeR) State of OH Report for the: Election on Title (OI) Torrimation Report (OI) Termination Report		TYPE OR PRINT ▼		, type 12FE4M5	
April 15 Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Quarterly Report (INVACARE CORPO	PRATION POLITICAL	L ACTION COMMIT	TEE AKA INVA P	AC
April 15 Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Quarterly Report (
than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER V C C C00249896 3. IS THIS NEW (N) OR AMENDED (A) 4. TYPE OF REPORT (b) Monthly Report (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Cotber 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-Election Report (Non-Election Near Only) (MY) Termination Report (TER) Termination Report (TER) C Covering Period To Treasurer Jerome E Fox Jr. C ITY A STATE A ZIP CODE A AMENDED AMENDED AMENDED AMENDED AMENDED (N) OR AMENDED AMENDED AMENDED AMENDED (N) OR AMENDED AMENDED AMENDED AMENDED AMENDED (N) OR AMENDED AMENDED (N) OR AMENDED AMENDED (N) OR AMENDED AMENDED (N) OR AMENDED (N) OR AMENDED AMENDED (N) OR AMENDED (N) Aug 20 (M8) Nov. 20 (M1) AMENDED (N) OR AMENDED (A) AUG 20 (M8) Nov. 20 (M1) Nov. 20 (M1) Aug 20 (M8) AMENDED (A) AMENDED (A) AMENDED (A) AMENDED (A) AMENDED (A) AUG 20 (M1) Nov. 20 (M1) Aug 20 (M5) Aug 20 (M5) Aug 20 (M5) Aug 20 (M6) Sep 20 (M9) Poct 20 (M10) Jan 31 (YE) Covention (12C) Special (12S) Covention (12C) Special (12S) Election on State of OH Covention (12C) Special (12S) Election on Special (12S) Feb 20 (M2) Apr 20 (M4) Jul 20 (M7) General (12G) Runoff (12R) Primary (12P) General (12G) Runoff (12R) Poct 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12	ADDRESS (number and street)				
than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER V C CTY A STATE A ZIP CODE A AMENDED (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Cotober 15 Quarterly Report (Q2) Cotober 15 Quarterly Report (Q3) January 31 Vaar-End Report (YE) July 31 Mid-Year Report (Non-Election Near Only) (MY) Termination Report (TER) Termination Report Te	Check if different				
A. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Cotober 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Choly) Termination Report (TER) (b) Monthly Report Peb 20 (M2) May 20 (M5) May 20 (M6) May 20 (M9) May 20 (M8) May 2	than previously	ELYRIA		OH OH	44035
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (O1) July 15 Quarterly Report (O2) Cotober 15 Quarterly Report (O3) January 31 Vear-End Report (VE) July 31 Mid-Year Report (Non-lection Year Only) (MY) Report (MA) Report (MA) Report (MA) Report (Non-lection Year Only) (MY) Report (MA)	2. FEC IDENTIFICATION	NUMBER ▼	CITY A	STATE 🛦	ZIP CODE ▲
(Choose One) (Report Due On:	C C00249896	3			
(a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Election on Report for the: Election on Report for the: R		Report Due On:			Year Only)
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Report for the: Convention (12C) Special (12S) Election on	(a) Quarterly Reports:				(Non-Election Year Only)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) General (30G) Report (12G) Report (12G			Apr 20 (M4) Ju	I 20 (M7) Oct	20 (M10) Jan 31 (YE)
October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) POST-Election Report for the: Election on General (30G) Runoff (30R) Report for the: Election on Termination Report (TER) Special (12S) Felocition on M. M. M. / D. D. / Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.	July 15	(c) 12-Day		General	(12G) Runoff (12R)
January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Date M M / D D / Y Y Y Y Y In the State of Special (30S) Runoff (30R) Special (30S) Report for the: Election on 11	October 15	Report for the	e: Convention (12	2C) Special (12S)
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Description on 11 O4 Post-Election on 11 D4 Post-Election on 11 Post-Election on	January 31	F.		D D / Y Y Y Y	
Termination Report (TER) Election on 11 / 04 / 2014 in the State of OH 5. Covering Period 10 / 16 / 2014 through 11 / 24 / 2014 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Jerome E Fox Jr. Signature of Treasurer Jerome E Fox Jr. [Electronically Filed] Date 11 / 25 / 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. Office Lice	July 31 Mid-Yea Report (Non-ele	ction (d) 30-Day POST-Election	` '	Runoff (3	Special (30S)
5. Covering Period 10 16 2014 through 11 24 2014 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Jerome E Fox Jr. Signature of Treasurer Jerome E Fox Jr. [Electronically Filed] Date 11 24 2014 More Print Name of Treasurer Jerome E Fox Jr. [Electronically Filed] Date 11 25 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.		port	M = M /		011
Type or Print Name of Treasurer Jerome E Fox Jr. [Electronically Filed] Date MMMM / DDD / YYYYYY 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. Office Lice Office	5. Covering Period				
Signature of Treasurer Jerome E Fox Jr. [Electronically Filed] Date 11 Date 11 Date 11 Date 11 Date 11 Date 11 PEC FORM 3X	I certify that I have examined	this Report and to the bes	st of my knowledge and be	elief it is true, correct and	d complete.
Signature of Treasurer Jerome E Fox Jr. [Electronically Filed] Date 11 25 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. Office Lice FEC FORM 3X	Type or Print Name of Treas	urer Jerome E Fox Jr.			
Office Like FEC FORM 3X	Signature of Treasurer $\frac{J_0}{J_0}$	erome E Fox Jr.	[Electronically l		
	NOTE: Submission of false, er	roneous, or incomplete inform	nation may subject the perso	n signing this Report to the	ne penalties of 2 U.S.C. §437g.
Only Hev. 12/2004	Use				FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

2014 Report Covering the Period: 10 16 2014 24 From: To: 11 **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 23922.25 January 1, 2014 (b) Cash on Hand at 8749.26 Beginning of Reporting Period..... 29329.52 1578.88 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 10328.14 53251.77 6(a) and 6(c) for Column B)..... 1144.64 44068.27 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 9183.50 9183.50 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 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)

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

	16 2014 To:	11 24 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
•	·	
	1337.32	22173.14
(,,		
	241.56	7156.38
Lines 11(a)(i) and (ii)	1578.88	29329.52
Political Party Committees	0.00	0.00
	7	
(such as PACs)	0.00	0.00
	1578.88	29329.52
	7	
	0.00	0.00
oans Received	0.00	0.00
D D	0.00	0.00
· ·	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
nds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
	0.00	0.00
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	7 7	
(from Schedule H3)	0.00	0.00
evin Funds (from Schedule H5)	0.00	0.00
otal Transfers (add 18(a) and 18(b))	0.00	0.00
	ributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	ributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calcinal Tour to Buto
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	0.00	0.00
	(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	0.00	0.00
	Committees	0.00	0.00
	Contributions to Federal Candidates/Committees and Other Political Committees	1000.00	42700.00
	Independent Expenditures	0.00	0.00
	(use Schedule E) Coordinated Party Expenditures	0.00	0.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
	Loans MadeRefunds of Contributions_To:	0.00	0.00
	(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
	Other Disbursements	144.64	1368.27
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	200
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,	44404	
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1144.64	44068.27
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1144.64	44068.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	1578.88	29329.52	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1578.88	29329.52	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

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

FOR LIN	E NUMBER	: PAGE	6 OF	13		
(check only one)						
X 11a	11b	11c	12			
13	14	15	16	17		

or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) INVACARE CORPORATION	POLITICAL ACTION COMMITTEE	AKA INVA PAC
Full Name (Last, First, Middle Initial) Cara Bachenheimer		Date of Receipt
Mailing Address 9323 Old Mansion Road		11 15 2014
City	State Zip Code	Transaction ID : SA11AI.8965
Alexandria	VA 22309	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	166.66
Name of Employer	Occupation	Biweekly PR ded of \$83.33 starting 10/31/14
Invacare Corporation	Sr. VP Government Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1749.93	
Full Name (Last, First, Middle Initial) 3. Christopher Carter		Date of Receipt
Mailing Address 17 W. Harvard Street		11 15 2014
City	State Zip Code	Transaction ID : SA11AI.8967
Orlando	FL 32804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Biweekly PR ded of \$10 starting 10/31/14
Invacare Corporation	Director of Operations - Sanford	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial)		
Wilton E Foster Jr.		Date of Receipt
Mailing Address 20 Pinewood Lane		11 15 2014
City	State Zip Code OH 44236	Transaction ID : SA11AI.8972
Hudson	OH 44236	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Biweekly PR ded of \$25 starting 10/31/14
Invacare Corporation	Director Applications & eCommerce	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	485.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	236.66
TOTAL This Period (last page this line numb	er only)	

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

I OIT EINE HOMBEIN					PAGE	=	7	OF	13
(che	(check only one)								
X	11a		11b		11c		12	2	
	13		14		15		16	6	17

or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) INVACARE CORPORATION	POLITICAL ACTION COMMITTEE	: AKA INVA PAC
Full Name (Last, First, Middle Initial) Jerome E. Fox Jr. Mailing Address 26114 Cobblestone Trail		Date of Receipt
City Columbia Station	State Zip Code OH 44028	11 15 2014 Transaction ID : SA11AI.8973
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 20.00
Name of Employer Invacare Corporation Receipt For:	Occupation VP - Corporate Tax Aggregate Year-to-Date ▼	Biweekly PR ded of \$10 starting 10/31/14
Primary General Other (specify) ▼	370.00	
Full Name (Last, First, Middle Initial) Meghan Griffin Mailing Address 2071 W 42nd Street		Date of Receipt
City Cleveland	State Zip Code OH 44113	Transaction ID : SA11AI.8976 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Invacare Corporation Receipt For:	Occupation Engineering Manager	Biweekly PR ded of \$50 starting 10/31/14
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Robert Gudbranson		Date of Receipt
Mailing Address 2521 Fairmount City	State Zip Code	11 15 2014
Cleveland	OH 44106	Transaction ID : SA11AI.8977 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.66
Name of Employer Invacare Corporation	Occupation Chief Financial Officer	Biweekly PR ded of \$208.33 starting 10/31/14
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4374.93	
SUBTOTAL of Receipts This Page (optional)	536.66
TOTAL This Period (last page this line num	ber only)	

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

FOR LINE NUMBER:					PAGE		8	OF	13
(check only one)									
X	11a	1	1b		11c		12		
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) INVACARE CORPORATION PO	DLITICAL ACTION COMMITTEE	AKA INVA PAC
Α.	Full Name (Last, First, Middle Initial) Thomas Herb		Date of Receipt
	Mailing Address 376 County Road 40		11 15 2014
	City	State Zip Code	Transaction ID : SA11AI.8978
	Sullivan	OH 44880	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer	Occupation	Biweekly PR ded of \$10 starting 10/31/14
	Invacare Corporation	Manager - Corporate Documentation	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	210.00	
В.	Full Name (Last, First, Middle Initial) Mark Kline		Date of Receipt
	Mailing Address 4488 Regal Circle		11 15 2014
	City	State Zip Code	Transaction ID : SA11AI.8981
	Akron	OH 44321	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer	Occupation	Biweekly PR ded of \$50 starting 10/31/14
	Invacare Corporation	Director Retail Sales	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1050.00	
<u> </u>	Full Name (Last, First, Middle Initial) Jill Kolczynski		Date of Receipt
	Mailing Address 805 Horseshoe Way		11 15 2014
	City	State Zip Code	Transaction ID : SA11AI.8982
	Avon Lake	OH 44012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer	Occupation	Biweekly PR ded of \$20 starting 10/31/14
	Invacare Corporation	Product Development Manager	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	400.00	
	Other (specify) ▼	420.00	
s	UBTOTAL of Receipts This Page (optional)		160.00
Т	OTAL This Period (last page this line number of	only)	

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

FOR	PAGE		9	OF	13			
(check only one)								
X	11a	11b		11c		12		
-	13	14		15		16		17

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) INVACARE CORPORATION PO	DLITICAL ACTION COMMITTEE	AKA INVA PAC
Α.	Full Name (Last, First, Middle Initial) Joseph Kuebler		Date of Receipt
	Mailing Address 38554 Avalon Drive		11 15 2014
	City	State Zip Code	Transaction ID : SA11AI.8983
	North Ridgeville	OH 44039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer	Occupation	Biweekly PR ded of \$10 starting 10/31/14
	Invacare Corporation	Engineering Manager - Respiratory	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	210.00	
— В.	Full Name (Last, First, Middle Initial) Seth Linebrink		Date of Receipt
	Mailing Address 14920 Diagonal Road		1,1 15 2014
	City	State Zip Code	Transaction ID : SA11AI.8985
	Lagrange	OH 44050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer	Occupation	Biweekly PR ded of \$20 starting 10/31/14
	Invacare Corporation	Manager, Financial Reporting	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	340.00	
 с.	Full Name (Last, First, Middle Initial) Jeffrey Randall		Date of Receipt
	Mailing Address 373 Main Street		11 15 _ 2014 _
	City	State Zip Code	Transaction ID : SA11AI.8988
	Lisbon Falls	ME 04252	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer	Occupation	Biweekly PR ded of \$10 starting 10/31/14
	Invacare Corporation	Territory Business Manager	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate real to bate v	
	Other (specify) ▼	210.00	
┢	SUBTOTAL of Receipts This Page (optional)	<u>r</u> _	80.00
ΙT	OTAL This Period (last page this line number of	only)	

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

	FOR LINE NUMBER: PAGE 10 OF 13							
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) INVACARE CORPORATION F	POLITICAL ACTION COMMITTEE	AKA INVA PAC
Full Name (Last, First, Middle Initial) John Remmers		Date of Receipt
Mailing Address 349 Aurora Street		11 15 2014
City Hudson	State Zip Code OH 44236	Transaction ID : SA11AI.8989
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	100.00
Name of Employer	Occupation	Biweekly PR ded of \$50 starting 10/31/14
Invacare Corporation	Sr. VP Supply Chain	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1050.00	
Full Name (Last, First, Middle Initial) 3. Frank Roche		Date of Receipt
Mailing Address 16414 St. Anthony Lane		11 15 2014
City Cleveland	State Zip Code OH 44111	Transaction ID : SA11AI.8990
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	50.00
Name of Employer	Occupation	Biweekly PR ded of \$25 starting 10/31/14
Invacare Corporation	VP National Sales Accounts	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) Cretchen Schuler		Date of Receipt
Mailing Address 28710 Berkshire Drive		11 15 2014
City North Olmsted	State Zip Code OH 44070	Transaction ID : SA11AI.8991 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer	Occupation	Biweekly PR ded of \$42 starting 10/31/14
Invacare Corporation	Director of Litigation Management	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	882.00	
SUBTOTAL of Receipts This Page (optional)		234.00
TOTAL This Period (last page this line numbe	r only)	

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

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13		14		15		16		17

or for commercial purposes, other than using	g the name and address of any political committee	to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) INVACARE CORPORATION	N POLITICAL ACTION COMMITTEE	E AKA INVA PAC	
Full Name (Last, First, Middle Initial) Douglas Uelmen Mailing Address 34417 Saint Marn Blvd.	Douglas Uelmen		
City Avon FEC ID number of contributing federal political committee. Name of Employer	State Zip Code OH 44011 C	11 15 2014 Transaction ID: SA11AI.8994 Amount of Each Receipt this Period 20.00 Biweekly PR ded of \$10 starting 10/31/14	
Invacare Corporation Receipt For: Primary General Other (specify) ▼	VP QA/RA Aggregate Year-to-Date ▼ 310.00		
Full Name (Last, First, Middle Initial) 3. Kimberly Wilhelm Mailing Address 2010 Gulf Road		Date of Receipt 11 15 2014	
City Elyria FEC ID number of contributing federal political committee.	State Zip Code OH 44035	Transaction ID : SA11AI.8995 Amount of Each Receipt this Period 50.00	
Name of Employer Invacare Corporation Receipt For: Primary General Other (specify) ▼	Occupation Sales & Service Manager - TAG Aggregate Year-to-Date ▼ 565.00	Biweekly PR ded of \$25 starting 10/31/14	
Full Name (Last, First, Middle Initial) Robert Zawtocki Mailing Address 433 Regatta Drive City	State Zip Code OH 44012	Date of Receipt 11 15 2014 Transaction ID : SA11AI.8996	
Avon Lake FEC ID number of contributing federal political committee. Name of Employer Invacare Corporation Receipt For: Primary Other (specify) Other (specify)	OH 44012 C Occupation Vice President Operations Aggregate Year-to-Date 210.00	Amount of Each Receipt this Period 20.00 Biweekly PR ded of \$10 starting 10/31/14	
SUBTOTAL of Receipts This Page (optional	NI)	90.00	
TOTAL This Period (last page this line num	nber only)	1337.32	

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 12 OF 13								
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBER:							
II LIVIIZED DIODORGEIVILIAIO	for each category of the Detailed Summary Page	21b	22 🔀 23 24 25 26							
		27	28a 28b 28c 29 30b							
Any information copied from such Reports and Statem										
or for commercial purposes, other than using the name	e and address of any politica	I committee to	solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	TIOAL ACTION CO.	45.41	ALCA INDICA DAG							
$ \; angle$ INVACARE CORPORATION POLI	LICAL ACTION CON	/IMITTEE /	AKA INVA PAC							
Full Name (Last, First, Middle Initial)										
A. STIVERS FOR CONGRESS			Date of Disbursement							
			M M / D D / Y Y Y Y							
Mailing Address 4679 WINTERSET DRIVE			10 30 2014							
City S	tate Zip Code									
· ·	OH 43220		Transaction ID: SB23.8998							
Purpose of Disbursement	7-2-1									
Fundraising event of October 8		011	Amount of Each Disbursement this Period							
Candidate Name		Category/	1000.00							
STEVE MR. STIVERS Office Sought: House Disbursem	ent For: 2014	Туре								
	Primary X General									
	Other (specify)									
State: OH District: 15										
Full Name (Last, First, Middle Initial)										
В.			Date of Disbursement							
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Purpose of Disbursement			Amount of Each Disbursement this Period							
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		Type								
Office Sought: House Disbursem										
	Primary General									
President State: District:	Other (specify) ▼									
Full Name (Last, First, Middle Initial)										
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Mailing Address										
City S	tate Zip Code									
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Purpose of Disbursement										
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Calluluate Inallie		Category/ Type								
Office Sought: House Disbursem	ent For:	турс								
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SUBTOTAL of Disbursements This Page (optional)		······	1000.00							
TOTAL This Period (last page this line number only).			1000.00							

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 13 OF 13												
ITEMIZED DISBURSEMENTS		Use separate schedule(s)		(check only			_ ITOMBEIT.								
		for each category of the Detailed Summary Page			21b	22		23	24		25	26			
_					27	28a		28b	28	3c X	29	30b			
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01	NAME OF COMMITTEE (In Full)	le and address of any politica	ii COII	IIIIIII	ee to	SOIICIL C	OHUH	butions	iroiii :	sucii c	JIIIIIII	ilee.			
$ \rangle$	INVACARE CORPORATION POLI		11.11	тт	FF	۱۸۷	NI\/	ΔР	۸۲						
	INVACARE CORT ORATION FOLI	TICAL ACTION CON	VIIVII			~I\/~ I	INV	Λ I <i>I</i>	10						
_	Full Name (Last, First, Middle Initial)														
Α.	PNC Bank							Date of Disbursement							
	Mailing Address 1900 East Ninth Street					M 10		3	D /		014	Υ			
	Maining Address 1900 East Militin Street					10	-	7	•		0 14				
	City	State Zip Code				Tran		ion ID	: SB29	9007					
	Cleveland	OH 44114				IIai	isac	טו ווטוו	. SDZS	.0991					
	Purpose of Disbursement Corporate Acct Analysis Fee		0	01		Amou	nt of	Fach	Disbur	semen	t this	Period			
	Candidate Name		_	-	./	711100		Luon	Diobai	Jointon		Tonod			
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	Office Sought: House Disbursen	nent For:													
		Primary General													
	State: District:	Other (specify) ▼													
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	Mailing Address							L.		L.					
	City	State Zip Code													
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C.	Full Name (Last, First, Middle Initial)					Data	of D	ichurce	mont						
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s	UBTOTAL of Disbursements This Page (optional)				•		_	7		,	14	4.64			
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