

RECEIVED

2011 JAN 14 AM 8:24  
FEC MAIL CENTER

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5  
INDIANA MANUFACTURERS ASSOCIATION PAC

ADDRESS (number and street) 2400 ONE AMERICAN SQ.  
Box 82012  
Check if different than previously reported. (ACC) INDIANAPOLIS IN 46282-0012

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE  
C 00440347 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report  
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31  
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special  
(d) 30-Day POST-Election Report for the: General, Runoff, Special  
Election on 11 / 02 / 2010 in the State of IN

5. Covering Period 10 / 01 / 2010 through 11 / 22 / 2010

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 EDWARD O. ROBERTS  
Signature of Treasurer [Signature] Date 07 / 03 / 2011

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

Office Use Only table with 10 columns and 1 row. FEC FORM 3X Rev. 12/2004

11030540575

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**INDIANA MANUFACTURERS ASSOCIATION PAC**

Report Covering the Period: From:

**10 ' 01 ' 2010**

To:

**11 ' 22 ' 2010**

**COLUMN A  
This Period**

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

6. (a) Cash on Hand January 1, <b>2010</b>		<b>2630.67</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>2851.89</b>	
(c) Total Receipts (from Line 19).....	<b>1000.18</b>	<b>3354.91</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<b>3852.07</b>	<b>5985.58</b>
7. Total Disbursements (from Line 31).....	<b>3012.00</b>	<b>5145.51</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<b>840.07</b>	<b>840.07</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>0</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>0</b>	



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

11030540576

**DETAILED SUMMARY PAGE  
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**INDIANA MANUFACTURERS ASSOCIATION PAC**

Report Covering the Period: From: **10 / 01 / 2010** To: **11 / 22 / 2010**

**I. Receipts**

**COLUMN A  
Total This Period**

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

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
  - (i) Itemized (use Schedule A).....
  - (ii) Unitemized.....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

0  
0  
0  
0  
1,000.00

1,350.00  
0  
1,350.00  
0  
2,000.00

- (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).....▶

1,000.00

3,350.00

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))..

0.18

4.91

0

0

0

0

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

1,000.18

3,354.91

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

1,000.18

3,354.91

11030540577

**DETAILED SUMMARY PAGE  
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 4

**II. Disbursements**

**COLUMN A  
Total This Period**

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

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share .....	0	0
(b) Other Federal Operating Expenditures .....	0	561.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0	561.51
22. Transfers to Affiliated/Other Party Committees .....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	3000.00	4500.00
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....	0	0
26. Loan Repayments Made .....	0	0
27. Loans Made .....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs) .....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	3000.00	5061.51
29. Other Disbursements .....	12.00	84.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share .....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25; 26, 27, 28(d), 29 and 30(c)) ..	3012.00	5145.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	3012.00	5145.51

11030540578

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0	0
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0	0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0	561.51
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0	561.51

11030540579

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

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

FOR LINE NUMBER: PAGE 1 OF 1  
(check only one)

<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

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 MANUFACTURERS ASSOCIATION PAC**

Full Name (Last, First, Middle Initial)

**A. VECTREN EMPLOYERS FEDERAL PAC**

Mailing Address

**PO BOX 209**

City **EVANSVILLE**

State

**IN**

Zip Code

**47708**

FEC ID number of contributing federal political committee.

**C 00240069**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**1,000.00**

Date of Receipt

**10 / 04 / 2010**

Amount of Each Receipt this Period

**1,000.00**

Full Name (Last, First, Middle Initial)

**B.**

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 ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

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 ▼

Date of Receipt

Amount of Each Receipt this Period

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

**1,000.00**

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

**1,000.00**

11030540580

**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 1
	<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	

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 MANUFACTURERS ASSOCIATION PAC**

**A. YOUNG TODD**  
 Mailing Address: **PO BOX 1053**  
 City: **BLOOMINGTON IN** State: **IN** Zip Code: **47402**  
 Purpose of Disbursement: **CONTRIBUTION**  
 Candidate Name: **FRIENDS OF TODD YOUNG**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)   
 State: **IN** District: **9**  
 Date of Disbursement: **10 ' 01 ' 2010**  
 Amount of Each Disbursement this Period: **1,000.00**  
 Category/Type: **011**

**B. WALORSKI JACQUELINE**  
 Mailing Address: **409 S. MAW ST.**  
 City: **ELKHART IN** State: **IN** Zip Code: **46516**  
 Purpose of Disbursement: **CONTRIBUTION**  
 Candidate Name: **WALORSKI FOR CONGRESS**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)   
 State: **IN** District: **2**  
 Date of Disbursement: **10 ' 01 ' 2010**  
 Amount of Each Disbursement this Period: **1,000.00**  
 Category/Type: **011**

**C. BUCSTON LARRY**  
 Mailing Address: **PO BOX 250**  
 City: **NEWBURGH IN** State: **IN** Zip Code: **47629**  
 Purpose of Disbursement: **CONTRIBUTION**  
 Candidate Name: **BUCSTON FOR CONGRESS**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)   
 State: **IN** District: **8**  
 Date of Disbursement: **10 ' 04 ' 2010**  
 Amount of Each Disbursement this Period: **1,000.00**  
 Category/Type: **011**

SUBTOTAL of Disbursements This Page (optional)..... **3,000.00**  
 TOTAL This Period (last page in this line number only)..... **3,000.00**

11030540581

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

11030540582

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 1/3/11
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify): Next Business Day Delivery <input type="checkbox"/>	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*Jm W*  
 PREPARER

1/14/11  
 DATE PREPARED