

RECEIVED

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FEC  
FORM 3XREPORT 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

CASS COUNTY REPUBLICAN CENTRAL COMMITTEE

ADDRESS (number and street)

PO BOX 791

Check if different  
than previously  
reported. (ACC)

LOGANSPORT

IN

46947-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00020453

3. IS THIS  
REPORTNEW  
(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  
Year-End 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 (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the  
State of

MM / DD / YYYY

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the  
State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

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

Tony P. Key

Signature of Treasurer

Tony P. Key

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

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  
OnlyFEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CASS County Republican Central Committee

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,	2010		2653081
(b) Cash on Hand at Beginning of Reporting Period.....		3258514	
(c) Total Receipts (from Line 19) .....		1932000	4163375
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....		5190514	6816456
7. Total Disbursements (from Line 31) .....		927518	2553460
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....		4262996	4262996
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. 06/2004)

Page 3

Write or Type Committee Name

*CASS County Republican Central Committee*

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).....▶

(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).....▶

**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**

(subtract Line 18(c) from Line 19).....▶

*1932000*

*1932000*

*1932000*

*1932000*

*1932000*

*4163375*

*4163375*

*4163375*

*4163375*

*4163375*

11030532589

## Page 4

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

- [illegible]

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Ex-  
penditures**

**COLUMN A  
Total This Period**

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

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 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) ..... ▶

19,320.00
19,320.00
9,275.18
9,275.18

41,633.75
41,633.75
25,534.60
25,534.60

11030532591

**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 / OF /

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

*CASS County Republican Central Committee*

Full Name (Last, First, Middle Initial)

Date of Receipt

MM / DD / YYYY

A.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Full Name (Last, First, Middle Initial)

Date of Receipt

MM / DD / YYYY

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Full Name (Last, First, Middle Initial)

Date of Receipt

MM / DD / YYYY

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

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

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

000  
000

**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 / OF 4

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CASS County Republican Central Committee

Full Name (Last, First, Middle Initial)

A.

Pharos Tribune

Date of Disbursement

10 / 05 / 2010

Mailing Address

517 E. Broadway

City

LOANSPOORT

State

IN

Zip Code

46947

Purpose of Disbursement

CANDIDATE ADS

Candidate Name

004

Category/  
Type

Amount of Each Disbursement this Period

7,450.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

WHZR

Date of Disbursement

10 / 05 / 2010

Mailing Address

425 2nd ST

City

LOANSPOORT

State

IN

Zip Code

46947

Purpose of Disbursement

CANDIDATE ADS

Candidate Name

004

Category/  
Type

Amount of Each Disbursement this Period

1,350.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

WSAL / mix 102

Date of Disbursement

10 / 05 / 2010

Mailing Address

425 2nd ST

City

LOANSPOORT

State

IN

Zip Code

46947

Purpose of Disbursement

CANDIDATE ADS

Candidate Name

004

Category/  
Type

Amount of Each Disbursement this Period

5,130.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

13,930.00

11030532592

**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 2 OF 4

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CASS County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. Pharos Tribune

Date of Disbursement

10 / 06 / 2010

Mailing Address

517 E. Broadway

City

LOGANSPORT

State

IN

Zip Code

46947

Purpose of Disbursement

CANDIDATE ADS

Candidate Name

004  
Category/  
Type

Amount of Each Disbursement this Period

25000

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. WSAZ / m. 102

Date of Disbursement

10 / 06 / 2010

Mailing Address

425 2nd ST

City

LOGANSPORT

State

IN

Zip Code

46947

Purpose of Disbursement

CANDIDATE ADS

Candidate Name

004  
Category/  
Type

Amount of Each Disbursement this Period

25000

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. CASS Co Republican Holding Corp

Date of Disbursement

10 / 20 / 2010

Mailing Address

103 E. MARKET ST

City

LOGANSPORT

State

IN

Zip Code

46947

Purpose of Disbursement

Building Repairs

Candidate Name

001  
Category/  
Type

Amount of Each Disbursement this Period

300000

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

350000

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)

PAGE 3 OF 4

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

*CASS County Republican Central Committee*

Full Name (Last, First, Middle Initial)

A.

*Boondockers*

Date of Disbursement

*10/25/2010*

Mailing Address

*1 EEL RIVER AVE*

City

*LOGANSPOUT*

State

*IN*

Zip Code

*46947*

Purpose of Disbursement

*Fall Fundraiser Facility + Food*

Candidate Name

*003*

Category/  
Type

Amount of Each Disbursement this Period

*3492.67*

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

*Frontier*

Date of Disbursement

*10/27/2010*

Mailing Address

City

State

Zip Code

Purpose of Disbursement

*Telephone*

Candidate Name

*001*

Category/  
Type

Amount of Each Disbursement this Period

*1079.1*

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

*Postmaster*

Date of Disbursement

*10/28/2010*

Mailing Address

*406 9TH ST*

City

State

Zip Code

*LOGANSPOUT*

*IN*

*46947*

Purpose of Disbursement

*STAMPS*

Candidate Name

*001*

Category/  
Type

Amount of Each Disbursement this Period

*88.0*

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

*3409.38*

*88.0*

**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 4 OF 4

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CASS County Republican Central Committee

Full Name (Last, First, Middle Initial)

A.

Tom Weatherway

Mailing Address

3012 Woodland Dr.

City

State

Zip Code

LOGANSPOUT

IN

46947

Purpose of Disbursement

Fundraiser Expenses

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

11 / 04 / 2010

Amount of Each Disbursement this Period

77280

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

77280  
927518

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked 1/6/11
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
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Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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PREPARER

(3/2005)

1/7/11

DATE PREPARED

11030532597